

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

American College of Radiology Association PAC

ADDRESS (number and street)

1891 Preston White Drive

☐ Check if different than previously reported. (ACC)

Reston

VA

20191

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00343459

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☒ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Richard Taxin MD

Signature of Treasurer

Richard Taxin MD

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

American College of Radiology Association PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
07 / 01 / 2014 To: M M / D D / Y Y Y Y Y Y  
07 / 31 / 2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">2014</span>		<span style="border: 1px solid black; padding: 2px;">980643.48</span>
(b) Cash on Hand at Beginning of Reporting Period.....	<span style="border: 1px solid black; padding: 2px;">835261.56</span>	
(c) Total Receipts (from Line 19) .....	<span style="border: 1px solid black; padding: 2px;">68555.84</span>	<span style="border: 1px solid black; padding: 2px;">916289.72</span>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<span style="border: 1px solid black; padding: 2px;">903817.40</span>	<span style="border: 1px solid black; padding: 2px;">1896933.20</span>
7. Total Disbursements (from Line 31) .....	<span style="border: 1px solid black; padding: 2px;">420006.53</span>	<span style="border: 1px solid black; padding: 2px;">1413122.33</span>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<span style="border: 1px solid black; padding: 2px;">483810.87</span>	<span style="border: 1px solid black; padding: 2px;">483810.87</span>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

American College of Radiology Association PAC

Report Covering the Period:

From:

M M M	/	D D D	/	Y Y Y Y Y
07		01		2014

To:

M M M	/	D D D	/	Y Y Y Y Y
07		31		2014

**I. Receipts**
**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

63475.96

800884.83

(ii) Unitemized .....

5079.88

105404.89

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

68555.84

906289.72

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) .....

68555.84

906289.72

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

10000.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3) .....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

68555.84

916289.72

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) .....

68555.84

916289.72

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	899.69	11389.17
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	899.69	11389.17
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	83500.00	657000.00
24. Independent Expenditures (use Schedule E) .....	335606.84	744733.16
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	420006.53	1413122.33
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	420006.53	1413122.33

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	68555.84	906289.72
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	68555.84	906289.72
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	899.69	11389.17
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	899.69	11389.17

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 125

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. Essmaeel H Abdel-Dayem MD**

Mailing Address 25 Thatcher St Apt 5

City

Brookline

State

MA

Zip Code

02446-3532

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 02 / 2014

Transaction ID : C2789523

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Essmaeel H Abdel-Dayem MD**

Mailing Address 25 Thatcher St Apt 5

City

Brookline

State

MA

Zip Code

02446-3532

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 03 / 2014

Transaction ID : C2789539

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Stephen Israel Abedon**

Mailing Address 64 Elmgrove Ave

City

Providence

State

RI

Zip Code

02906-4135

FEC ID number of contributing  
federal political committee.

C

Name of Employer

California Advanced Imaging Medical As

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 21 / 2014

Transaction ID : C2789449

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)..... ►

275.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 7 OF 125

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Darshan J Acharya MD**

Mailing Address 2200 12th Ct N Apt 600

City

Arlington

State

VA

Zip Code

22201-6513

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Virginia Radiology Associates PC

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	2		2	0	1	4

**Transaction ID : C2779232**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Deborah Gould Agisim**

Mailing Address 5600 Laurium Rd

City

Charlotte

State

NC

Zip Code

28226-5610

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Charlotte Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	1		2	0	1	4

**Transaction ID : C2809193**

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**C. John Edward Agles**

Mailing Address 116 Sundance Trail

City

Ormond Beach

State

FL

Zip Code

32176-5744

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiology Associates of Daytona Beach

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	1		2	0	1	4

**Transaction ID : C2788367**

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

1090.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 125

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. Harry Agress JR**

Mailing Address Hackensack University Medical Ctr  
30 Prospect Ave

City State Zip Code  
Hackensack NJ 07601-1914

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.42

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 10 / 2014

Transaction ID : C2789468

Amount of Each Receipt this Period

23.07

Full Name (Last, First, Middle Initial)

**B. Harry Agress JR**

Mailing Address Hackensack University Medical Ctr  
30 Prospect Ave

City State Zip Code  
Hackensack NJ 07601-1914

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.42

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 24 / 2014

Transaction ID : C2798621

Amount of Each Receipt this Period

23.07

Full Name (Last, First, Middle Initial)

**C. Arthur S Albert**

Mailing Address 124 W 60th St Apt 45

City State Zip Code  
New York NY 10023-7402

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.42

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 10 / 2014

Transaction ID : C2789469

Amount of Each Receipt this Period

23.07

SUBTOTAL of Receipts This Page (optional)..... ►

69.21

TOTAL This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 9 OF 125

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Arthur S Albert**

Mailing Address 124 W 60th St Apt 45

City

New York

State

NY

Zip Code

10023-7402

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.42

Date of Receipt

MM / DD / YYYY  
07 / 24 / 2014

**Transaction ID : C2798622**

Amount of Each Receipt this Period

23.07

Full Name (Last, First, Middle Initial)

**B. David Alan Alexander MD**

Mailing Address 2141 272nd Way SE

City

Sammamish

State

WA

Zip Code

98075-7937

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radia, Inc.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

MM / DD / YYYY  
07 / 03 / 2014

**Transaction ID : C2789499**

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**C. Bibb Allen JR**

Mailing Address 3245 E Briarcliff Rd

City

Birmingham

State

AL

Zip Code

35223-1304

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Montclair Baptist Medical Center

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1875.00

Date of Receipt

MM / DD / YYYY  
07 / 01 / 2014

**Transaction ID : C2767259**

Amount of Each Receipt this Period

625.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

948.07

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 125

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. Mark David Alson**

Mailing Address 6641 N Forkner Ave

City	State	Zip Code
Fresno	CA	93711-1326

FEC ID number of contributing federal political committee.

C

Name of Employer

Sierra Imaging Associates

Occupation

Diagnostic Radiologist

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

775.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	27	/	2014

Transaction ID : C2789921

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**B. Rafael A Altieri**

Mailing Address 15 Savoy St Apt D308

City	State	Zip Code
Boston	MA	02118-2588

FEC ID number of contributing federal political committee.

C

Name of Employer

South Shore Radiological Associates

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	02	/	2014

Transaction ID : C2789524

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Rafael A Altieri**

Mailing Address 15 Savoy St Apt D308

City	State	Zip Code
Boston	MA	02118-2588

FEC ID number of contributing federal political committee.

C

Name of Employer

South Shore Radiological Associates

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	03	/	2014

Transaction ID : C2789540

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

275.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 125

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Larry S Anderson

Mailing Address 3822 Colby Ave

City State Zip Code  
 Everett WA 98201-4913

FEC ID number of contributing federal political committee.

C

Name of Employer

Radia, Inc.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 03 / 2014

Transaction ID : C2789500

Amount of Each Receipt this Period

120.00

Full Name (Last, First, Middle Initial)

B. Thomas A Applewhite

Mailing Address 13074 Starbuck Rd

City State Zip Code  
 Saint Louis MO 63141-8544

FEC ID number of contributing federal political committee.

C

Name of Employer

West County Radiological Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 03 / 2014

Transaction ID : C2779105

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

C. Raymond Alton Armstrong

Mailing Address Radiology of Huntsville  
 2006 Franklin St SE Ste 200

City State Zip Code  
 Huntsville AL 35801-4537

FEC ID number of contributing federal political committee.

C

Name of Employer

Baptist Medical Ctr-Montclair

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 09 / 2014

Transaction ID : C2776551

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

295.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 125

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. Diana Beth Baker**

Mailing Address 335 Ambar Way

City State Zip Code  
 Menlo Park CA 94025-5801

FEC ID number of contributing federal political committee.

C

Name of Employer

California Advanced Imaging Medical As

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 21 2014

Transaction ID : C2789420

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**B. Edward L Baker**Mailing Address California Pacific Med Ctr  
PO Box 7999

City State Zip Code  
 San Francisco CA 94120-7999

FEC ID number of contributing federal political committee.

C

Name of Employer

California Advanced Imaging Medical As

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 21 2014

Transaction ID : C2789419

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**C. Marchello Joseph Barbarisi**

Mailing Address 415 City Ave Apt 13

City State Zip Code  
 Merion Station PA 19066-1841

FEC ID number of contributing federal political committee.

C

Name of Employer

Radiology Associates of the Main Line

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 18 2014

Transaction ID : C2789695

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

190.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

FOR LINE NUMBER: PAGE 13 OF 125

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. Ricardo B Barboza**

Mailing Address 4633 Kingston Ct

City	State	Zip Code
Columbus	OH	43220-2830

FEC ID number of contributing federal political committee.

C

 Name of Employer  
 Columbus Radiology

 Occupation  
 Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	23	/	2014

Transaction ID : C2798649

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

**B. Robert Marlowe Barr**

Mailing Address 215 Wrenwood Ln

City	State	Zip Code
Charlotte	NC	28211-1848

FEC ID number of contributing federal political committee.

C

 Name of Employer  
 Mecklenburg Radiology Associates, P.A.

 Occupation  
 Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

876.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	01	/	2014

Transaction ID : C2779112

Amount of Each Receipt this Period

21.00

Full Name (Last, First, Middle Initial)

**C. Amir R Batouli**

Mailing Address 324 Lantern Lane

City	State	Zip Code
Chambersburg	PA	17201

FEC ID number of contributing federal political committee.

C

 Name of Employer  
 Chambersburg Imaging Associates

 Occupation  
 Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	30	/	2014

Transaction ID : C2797896

Amount of Each Receipt this Period

260.00

SUBTOTAL of Receipts This Page (optional)..... ►

431.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

FOR LINE NUMBER: PAGE 14 OF 125

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. Howard Marshall Bear**

Mailing Address 4931 Pearlman Way

City

San Diego

State

CA

Zip Code

92130-2789

FEC ID number of contributing  
federal political committee.

C

Name of Employer

San Diego Imaging Medical Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	07	/	2014

Transaction ID : C2771930

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Daniel J Becker**

Mailing Address 1015 Murray Hill Ln

City

Memphis

State

TN

Zip Code

38120-2643

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Mid South Imaging, P.C.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

294.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	11	/	2014

Transaction ID : C2779158

Amount of Each Receipt this Period

294.00

Full Name (Last, First, Middle Initial)

**C. Lance J Becker**

Mailing Address 1405 Wesleys Run

City

Gladwyne

State

PA

Zip Code

19035-1049

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Southeast Radiology, Ltd.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	10	/	2014

Transaction ID : C2779079

Amount of Each Receipt this Period

120.00

SUBTOTAL of Receipts This Page (optional)..... ►

464.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

FOR LINE NUMBER: PAGE 15 OF 125

(check only one)

☒ 11a    ☐ 11b    ☐ 11c    ☐ 12  
☐ 13    ☐ 14    ☐ 15    ☐ 16    ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. G Gregg Berg**

Mailing Address 2253 Indian Hill Rd

City

Cedar Rapids

State

IA

Zip Code

52403-1521

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiology Consultants of Iowa

Occupation

Diagnostic Radiologist

Receipt For:

☐  
☐

Primary

☐  
☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y  
 07 / 10 / 2014

Transaction ID : C2789508

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Kenneth G Berkenstock**Mailing Address Lancaster Radiology Associates  
PO Box 3555

City

Lancaster

State

PA

Zip Code

17604-3555

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Lancaster Radiology Associates

Occupation

Radiation Oncologist

Receipt For:

☐  
☐

Primary

☐  
☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

588.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y  
 07 / 01 / 2014

Transaction ID : C2789482

Amount of Each Receipt this Period

84.00

Full Name (Last, First, Middle Initial)

**C. Timothy Andrew Bernauer**

Mailing Address 13 Pintail Pl

City

Appleton

State

WI

Zip Code

54913-8068

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiology Associates of Appleton

Occupation

Diagnostic Radiologist

Receipt For:

☐  
☐

Primary

☐  
☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

1470.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y  
 07 / 18 / 2014

Transaction ID : C2787562

Amount of Each Receipt this Period

210.00

SUBTOTAL of Receipts This Page (optional)..... ►

394.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. James S Bezreh**

Mailing Address South Shore Hospital  
55 Fogg Rd

City State Zip Code  
South Weymouth MA 02190-2455

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
South Shore Hospital

Occupation  
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 02 2014

**Transaction ID : C2789525**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. James S Bezreh**

Mailing Address South Shore Hospital  
55 Fogg Rd

City State Zip Code  
South Weymouth MA 02190-2455

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
South Shore Hospital

Occupation  
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 03 2014

**Transaction ID : C2789541**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Donals Bittner**

Mailing Address 201 Rosemont Farm Rd

City State Zip Code  
Franklin PA 16323

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Vernango Diagnostic Imaging

Occupation  
Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 10 2014

**Transaction ID : C2777960**

Amount of Each Receipt this Period

365.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

565.00



**SCHEDULE A (FEC Form 3X)****ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 17 OF 125

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Justin Tyler Blum MD**

Mailing Address 11 Kershaw Rd

City

Wallingford

State

PA

Zip Code

19086-6203

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Southeast Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	0		2	0	1	4

**Transaction ID : C2779080**

Amount of Each Receipt this Period

120.00

Full Name (Last, First, Middle Initial)

**B. Adam Russell Bogomol**Mailing Address 200 W 72nd St  
Apt 11K

City

New York

State

NY

Zip Code

10023-3267

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.42

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	0		2	0	1	4

**Transaction ID : C2789481**

Amount of Each Receipt this Period

23.07

Full Name (Last, First, Middle Initial)

**c. Adam Russell Bogomol**Mailing Address 200 W 72nd St  
Apt 11K

City

New York

State

NY

Zip Code

10023-3267

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.42

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	4		2	0	1	4

**Transaction ID : C2798623**

Amount of Each Receipt this Period

23.07

**SUBTOTAL** of Receipts This Page (optional)..... ►

166.14

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 18 OF 125  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Michael Hamilton Brannon**

Mailing Address 114 Holland Trace Cir

City	State	Zip Code
Simpsonville	SC	29681-5869

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Greenville RadiologyOccupation  
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	02	/	2014

**Transaction ID : C2770894**

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

**B. Chad William Brecher**

Mailing Address 235 S Wayne Ave

City	State	Zip Code
Wayne	PA	19087-4820

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Southeast RadiologyOccupation  
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	10	/	2014

**Transaction ID : C2779081**

Amount of Each Receipt this Period

120.00

Full Name (Last, First, Middle Initial)

**C. Kelly C Broderick**

Mailing Address 185 Crest Rd

City	State	Zip Code
Woodside	CA	94062-2308

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
California Advanced Imaging, M.A.Occupation  
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	21	/	2014

**Transaction ID : C2789421**

Amount of Each Receipt this Period

75.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

237.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 OF 125

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Martha Anne Brogan**

Mailing Address 5033 Glenaire Dr

City	State	Zip Code
Dublin	OH	43017-9479

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Columbus RadiologyOccupation  
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		23		2014

**Transaction ID : C2798650**

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

**B. Thomas Andrew Brooks**

Mailing Address 1930 Pickering Trl

City	State	Zip Code
Lancaster	PA	17601-4972

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Lancaster Radiology AssociatesOccupation  
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		01		2014

**Transaction ID : C2789483**

Amount of Each Receipt this Period

35.00

Full Name (Last, First, Middle Initial)

**c. Joseph Benjamin Broudy MD**

Mailing Address 271 S Van Pelt St Apt B

City	State	Zip Code
Philadelphia	PA	19103-4937

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Lourdes Imaging AssociatesOccupation  
Diagnostic and Interventional Radiolog

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.15

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		18		2014

**Transaction ID : C2787563**

Amount of Each Receipt this Period

30.42

**SUBTOTAL** of Receipts This Page (optional)..... ►

215.42

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 20 OF 125

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. John S Buchignani JR**

Mailing Address 6080 River Oaks Rd

City

Memphis

State

TN

Zip Code

38120-2547

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Mid South Imaging

Occupation

Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	1		2	0	1	4

**Transaction ID : C2779146**

Amount of Each Receipt this Period

294.00

Full Name (Last, First, Middle Initial)

**B. Joel A Budin**

Mailing Address 140 Chestnut St

City

Englewood

State

NJ

Zip Code

07631-3033

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.73

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	0		2	0	1	4

**Transaction ID : C2789459**

Amount of Each Receipt this Period

9.61

Full Name (Last, First, Middle Initial)

**C. Joel A Budin**

Mailing Address 140 Chestnut St

City

Englewood

State

NJ

Zip Code

07631-3033

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.73

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	4		2	0	1	4

**Transaction ID : C2798624**

Amount of Each Receipt this Period

9.61

**SUBTOTAL** of Receipts This Page (optional)..... ►

313.22

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Derek Alan Burdeny**

Mailing Address 1509 S 182nd Cir

City

Omaha

State

NE

Zip Code

68130-2720

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Midwest Medical Imaging Ctr

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	1		2	0	1	4

**Transaction ID : C2789422**

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**B. Stephen Joseph Burke MD**

Mailing Address 2860 Meadowlark PI NE

City

Iowa City

State

IA

Zip Code

52240-8081

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiology Consultants of Iowa, PLC

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	0		2	0	1	4

**Transaction ID : C2789509**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Vincent D Burke**Mailing Address Sequoia Hospital  
170 Alameda de las Pulgas

City

Redwood City

State

CA

Zip Code

94062-2799

FEC ID number of contributing  
federal political committee.

C

Name of Employer

California Advanced Imaging Medical As

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	1		2	0	1	4

**Transaction ID : C2789423**

Amount of Each Receipt this Period

75.00

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

400.00

**SCHEDULE A (FEC Form 3X)****ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Larry J Burr**

Mailing Address 2601 Deer Lane Rd

City  
MarionState  
IAZip Code  
52302-9304FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiology Consultants of Iowa

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	10	/	2014

**Transaction ID : C2789510**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Justin John Campbell MD**

Mailing Address 55 Fogg Rd

City

South Weymouth

State

MA

Zip Code

02190-2432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Massachusetts General Hospital

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	02	/	2014

**Transaction ID : C2789526**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Justin John Campbell MD**

Mailing Address 55 Fogg Rd

City

South Weymouth

State

MA

Zip Code

02190-2432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Massachusetts General Hospital

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	03	/	2014

**Transaction ID : C2789542**

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

450.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

FOR LINE NUMBER: PAGE 23 OF 125

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. Vida Ashraf Campbell**

Mailing Address 2539 Vallejo St

City	State	Zip Code
San Francisco	CA	94123-4640

FEC ID number of contributing federal political committee.

C

Name of Employer

California Advanced Imaging Medical As

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	21	/	2014

Transaction ID : C2789424

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**B. Oscar F Carbonell**

Mailing Address 12 Broadriver Rd

City	State	Zip Code
Ormond Beach	FL	32174-8743

FEC ID number of contributing federal political committee.

C

Name of Employer

Radiology Associates of Daytona Beach

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	21	/	2014

Transaction ID : C2788368

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. John Thomas Carroll**

Mailing Address 4363 S Atlantic Ave

City	State	Zip Code
Ponce Inlet	FL	32127-6941

FEC ID number of contributing federal political committee.

C

Name of Employer

Radiology Associates

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	21	/	2014

Transaction ID : C2788369

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2075.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Frank Michael Castellano MD**

Mailing Address 7158 Tumblebrook Dr

City State Zip Code  
New Albany OH 43054-8828

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Columbus Radiology

Occupation  
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 23 / 2014

**Transaction ID : C2798651**

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

**B. Mark Aaron Chambers MD**

Mailing Address 1005 Des Peres Woods Ct

City State Zip Code  
Des Peres MO 63131-2055

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
West County Radiological Group

Occupation  
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 03 / 2014

**Transaction ID : C2779106**

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**c. Shelley K Charnoff**

Mailing Address 192 Hinckley Rd

City State Zip Code  
Milton MA 02186-2853

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
South Shore Hospital

Occupation  
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 02 / 2014

**Transaction ID : C2789527**

Amount of Each Receipt this Period

75.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

300.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. Shelley K Charnoff**

Mailing Address 192 Hinckley Rd

City State Zip Code  
Milton MA 02186-2853

FEC ID number of contributing federal political committee.

C

Name of Employer

South Shore Hospital

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 03 2014

Transaction ID : C2789543

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**B. Jugesh Inder Cheema**

Mailing Address 2466 Oak Bend Pl

City State Zip Code  
Newburgh IN 47630-8168

FEC ID number of contributing federal political committee.

C

Name of Employer

Medical Center of Delaware

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 21 2014

Transaction ID : C2809194

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**C. Raja Sekhar Cheruvu**

Mailing Address 165 Via Foresta Ln

City State Zip Code  
Williamsville NY 14221-1984

FEC ID number of contributing federal political committee.

C

Name of Employer

Windsong Radiology Group

Occupation

Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 02 2014

Transaction ID : C2771007

Amount of Each Receipt this Period

62.50

SUBTOTAL of Receipts This Page (optional)..... ►

212.50

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Raja Sekhar Cheruvu**

Mailing Address 165 Via Foresta Ln

City

Williamsville

State

NY

Zip Code

14221-1984

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Windsong Radiology Group

Occupation

Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.98

Date of Receipt

07 / 14 / 2014

Transaction ID : C2789680

Amount of Each Receipt this Period

62.52

Full Name (Last, First, Middle Initial)

**B. Henry Ta-Wah Ching**

Mailing Address 854 Rosewood Ct

City

Chambersburg

State

PA

Zip Code

17201-2891

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Chambersburg Imaging Associates

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

07 / 30 / 2014

Transaction ID : C2797894

Amount of Each Receipt this Period

265.00

Full Name (Last, First, Middle Initial)

**c. Daryl H Chinn**

Mailing Address 115 Kreuzer Ln

City

Napa

State

CA

Zip Code

94559-3605

FEC ID number of contributing  
federal political committee.

C

Name of Employer

California Advanced Imaging Medical As

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

07 / 21 / 2014

Transaction ID : C2789425

Amount of Each Receipt this Period

75.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

402.52

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Regina Wong Chu**

Mailing Address 15 Ogle Rd

City

Old Tappan

State

NJ

Zip Code

07675-7028

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.73

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 10 / 2014

**Transaction ID : C2789460**

Amount of Each Receipt this Period

9.61

Full Name (Last, First, Middle Initial)

**B. Regina Wong Chu**

Mailing Address 15 Ogle Rd

City

Old Tappan

State

NJ

Zip Code

07675-7028

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.73

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 24 / 2014

**Transaction ID : C2798625**

Amount of Each Receipt this Period

9.61

Full Name (Last, First, Middle Initial)

**C. James P Coleman MD**

Mailing Address 7357 Savannah Dr

City

Marion

State

MS

Zip Code

39342-9004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 27 / 2014

**Transaction ID : C2789919**

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

119.22

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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for each category of the  
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Lisa Ann Collazzo

Mailing Address 3 Pennsford Ln

City State Zip Code  
 Media PA 19063-2051

FEC ID number of contributing federal political committee.

C

Name of Employer

Southeast Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 10 / 2014

Transaction ID : C2779082

Amount of Each Receipt this Period

120.00

Full Name (Last, First, Middle Initial)

B. W Shawn Conwell MD

Mailing Address 293 Piney Bluff Rd

City State Zip Code  
 Rembert SC 29128-9630

FEC ID number of contributing federal political committee.

C

Name of Employer

Pitts Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2916.62

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 28 / 2014

Transaction ID : C2792040

Amount of Each Receipt this Period

416.66

Full Name (Last, First, Middle Initial)

c. Joseph E Cox

Mailing Address 1920 W Granada Blvd

City State Zip Code  
 Ormond Beach FL 32174-6739

FEC ID number of contributing federal political committee.

C

Name of Employer

Radiology Associates of Daytona Beach

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 21 / 2014

Transaction ID : C2788370

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1536.66

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Jana Crain**

Mailing Address 863 Corriente Point Dr

City

Redwood City

State

CA

Zip Code

94065-1284

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Univ of AR Medical Ctr

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

07 / 21 / 2014

**Transaction ID : C2789426**

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**B. Daniel Andrew Craven**

Mailing Address 1334 Marsh Creek Ln

City

Collierville

State

TN

Zip Code

38017-3940

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Mid South Imaging

Occupation

Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.69

Date of Receipt

07 / 11 / 2014

**Transaction ID : C2779164**

Amount of Each Receipt this Period

291.69

Full Name (Last, First, Middle Initial)

**C. Timothy Andrew Crummy**

Mailing Address 2509 Middleton Beach Rd

City

Madison

State

WI

Zip Code

53562-2912

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Madison Radiologists

Occupation

Diagnostic Radiologist

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

491.26

Date of Receipt

07 / 05 / 2014

**Transaction ID : C2771625**

Amount of Each Receipt this Period

30.42

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

397.11

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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for each category of the  
Detailed Summary Page

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Henry Jivan Dalsania MD**

Mailing Address 360 Forest Hill Irene Rd S

City

Cordova

State

TN

Zip Code

38018-4830

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Mid South Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 11 / 2014

**Transaction ID : C2779140**

Amount of Each Receipt this Period

294.00

Full Name (Last, First, Middle Initial)

**B. Robert C Danielson**

Mailing Address 6105 Shadowbrook Dr

City

Bettendorf

State

IA

Zip Code

52722-6567

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiology Group, P.C.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 30 / 2014

**Transaction ID : C2794784**

Amount of Each Receipt this Period

120.00

Full Name (Last, First, Middle Initial)

**C. Robert H Darwin**

Mailing Address 185 S Columbia Ave

City

Columbus

State

OH

Zip Code

43209-1625

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Columbus Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 23 / 2014

**Transaction ID : C2798652**

Amount of Each Receipt this Period

75.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

489.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Melissa B Davis

Mailing Address 4610 Sandwich Ct

City State Zip Code  
Dublin OH 43016-8292

FEC ID number of contributing federal political committee.

C

Name of Employer  
Columbus Radiology

Occupation  
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 23 / 2014

Transaction ID : C2798653

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

B. W James DeMartini

Mailing Address 126 Terrace Ave

City State Zip Code  
Kentfield CA 94904-1531

FEC ID number of contributing federal political committee.

C

Name of Employer  
California Advanced Imaging Medical As

Occupation  
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 21 / 2014

Transaction ID : C2789427

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

c. John S DeMeritt

Mailing Address 18 Baldwin Rd

City State Zip Code  
Saddle River NJ 07458-3203

FEC ID number of contributing federal political committee.

C

Name of Employer  
Hackensack Radiology Group

Occupation  
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.42

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 10 / 2014

Transaction ID : C2789470

Amount of Each Receipt this Period

23.07

SUBTOTAL of Receipts This Page (optional)..... ►

248.07

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 32 OF 125

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. John S DeMeritt

Mailing Address 18 Baldwin Rd

City

Saddle River

State

NJ

Zip Code

07458-3203

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.42

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 24 / 2014

Transaction ID : C2798626

Amount of Each Receipt this Period

23.07

Full Name (Last, First, Middle Initial)

B. Susan R Denny

Mailing Address 402 Median Way

City

Mill Valley

State

CA

Zip Code

94941-3561

FEC ID number of contributing  
federal political committee.

C

Name of Employer

California Advanced Imaging Medical As

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 21 / 2014

Transaction ID : C2789428

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

C. Scott David Didier MD

Mailing Address 835 Tall Spruce Cv

City

Collierville

State

TN

Zip Code

38017-8554

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Mid South Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 11 / 2014

Transaction ID : C2779159

Amount of Each Receipt this Period

294.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

392.07



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. Gary L Dillehay**

Mailing Address 5555 N Sheridan Rd, Apt 1402

City State Zip Code  
 Chicago IL 60640-1636

FEC ID number of contributing federal political committee.

C

Name of Employer

Northwestern Medical Faculty Foundation

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 10 2014

Transaction ID : C2776718

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Alan David Eisenberg**

Mailing Address 6305 Humphreys Blvd Ste 205

City State Zip Code  
 Memphis TN 38120-2379

FEC ID number of contributing federal political committee.

C

Name of Employer

Mid South Imaging

Occupation

Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 11 2014

Transaction ID : C2779151

Amount of Each Receipt this Period

294.00

Full Name (Last, First, Middle Initial)

**C. Amr Kamal El Jack MD, PhD**

Mailing Address 2223 E Deerfield Dr

City State Zip Code  
 Media PA 19063-1833

FEC ID number of contributing federal political committee.

C

Name of Employer

Southeast Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 10 2014

Transaction ID : C2779083

Amount of Each Receipt this Period

120.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

664.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Ahmed Bassem Elaini MD**

Mailing Address PO Box 54

City

Andover

State

MA

Zip Code

01810-0001

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Massachusetts General Hospital

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

07 / 02 / 2014

**Transaction ID : C2789528**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Ahmed Bassem Elaini MD**

Mailing Address PO Box 54

City

Andover

State

MA

Zip Code

01810-0001

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Massachusetts General Hospital

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

07 / 03 / 2014

**Transaction ID : C2789544**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Paul H Ellenbogen**

Mailing Address 4240 Prescott Ave Apt 7E

City

Dallas

State

TX

Zip Code

75219-2392

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Southwest Imaging & Interven specialis

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1458.38

Date of Receipt

07 / 16 / 2014

**Transaction ID : C2785146**

Amount of Each Receipt this Period

208.34

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

408.34

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. John Andy Ellzey**

Mailing Address 219 Lagrange Creek Dr

City State Zip Code  
Eads TN 38028-8015

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Baptist Memorial Hospital

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 11 / 2014

**Transaction ID : C2779145**

Amount of Each Receipt this Period

294.00

Full Name (Last, First, Middle Initial)

**B. Margaret Y Emy**

Mailing Address 245 Oxford Dr

City State Zip Code  
Tenaflly NJ 07670-3117

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.73

Date of Receipt

M M / D D / Y Y Y Y  
07 / 10 / 2014

**Transaction ID : C2789455**

Amount of Each Receipt this Period

9.61

Full Name (Last, First, Middle Initial)

**c. Margaret Y Emy**

Mailing Address 245 Oxford Dr

City State Zip Code  
Tenaflly NJ 07670-3117

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.73

Date of Receipt

M M / D D / Y Y Y Y  
07 / 24 / 2014

**Transaction ID : C2798627**

Amount of Each Receipt this Period

9.61

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

313.22

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. William Scott Enochs**

Mailing Address 230 Poplar Ave

City

Wayne

State

PA

Zip Code

19087-3504

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Thomas Jefferson University Ho

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

07 / 18 / 2014

**Transaction ID : C2789700**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Kathy Epley**

Mailing Address 1948 First Ave NE

City

Cedar Rapids

State

IA

Zip Code

52402-5321

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiology Consultants of Iowa, PLC

Occupation

Practice Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

07 / 10 / 2014

**Transaction ID : C2789511**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Virginia Eschbach**

Mailing Address 2410 141St Pl SE

City

Mill Creek

State

WA

Zip Code

98012-1336

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radia, Inc.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

07 / 03 / 2014

**Transaction ID : C2789501**

Amount of Each Receipt this Period

180.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

380.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 37 OF 125

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. Peter J Fang**

Mailing Address 930 Dewberry Ct

City State Zip Code  
 Chambersburg PA 17201

FEC ID number of contributing federal political committee.

C

Name of Employer  
 Chambersburg Imaging Associates

Occupation  
 Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 / 30 / 2014

Transaction ID : C2797891

Amount of Each Receipt this Period

265.00

Full Name (Last, First, Middle Initial)

**B. George Joseph Ferrone**

Mailing Address 440 E 62nd St Apt 18F

City State Zip Code  
 New York NY 10065-8345

FEC ID number of contributing federal political committee.

C

Name of Employer  
 Hackensack Radiology Group

Occupation  
 Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.42

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 / 10 / 2014

Transaction ID : C2789461

Amount of Each Receipt this Period

23.07

Full Name (Last, First, Middle Initial)

**C. George Joseph Ferrone**

Mailing Address 440 E 62nd St Apt 18F

City State Zip Code  
 New York NY 10065-8345

FEC ID number of contributing federal political committee.

C

Name of Employer  
 Hackensack Radiology Group

Occupation  
 Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.42

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 / 24 / 2014

Transaction ID : C2798628

Amount of Each Receipt this Period

23.07

SUBTOTAL of Receipts This Page (optional)..... ►

311.14

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Adam Robert Fisher**

Mailing Address 2035 Grantham Rd

City

Berwyn

State

PA

Zip Code

19312-2119

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Southeast Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 10 / 2014

**Transaction ID : C2779084**

Amount of Each Receipt this Period

120.00

Full Name (Last, First, Middle Initial)

**B. John L Floyd**

Mailing Address Cedar Rapids Radiologists PC  
1948 1st Ave NE

City

Cedar Rapids

State

IA

Zip Code

52402-5377

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiology Consultants of Iowa, PLC

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 10 / 2014

**Transaction ID : C2789512**

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**C. Jason Hilton Fox**

Mailing Address 5271 Rosalind Blvd

City

Powell

State

OH

Zip Code

43065-8262

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hofheimer Hall Suite 541

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 23 / 2014

**Transaction ID : C2798654**

Amount of Each Receipt this Period

150.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

345.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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PAGE 39 OF 125

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Russell Clinton Fritz**

Mailing Address 487 Green Glen Way

City

Mill Valley

State

CA

Zip Code

94941-4018

FEC ID number of contributing  
federal political committee.

C

Name of Employer

California Advanced Imaging Medical As

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

MM / DD / YYYY  
07 / 21 / 2014

**Transaction ID : C2789429**

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**B. Yiu-Kai Fu**

Mailing Address 13028 7th Ave NW

City

Seattle

State

WA

Zip Code

98177-4243

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radia, Inc.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

599.94

Date of Receipt

MM / DD / YYYY  
07 / 03 / 2014

**Transaction ID : C2789502**

Amount of Each Receipt this Period

199.98

Full Name (Last, First, Middle Initial)

**C. Gregory M Galdino**

Mailing Address 9 Applestone Dr

City

Jackson

State

TN

Zip Code

38305-6919

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Southern Radiology Associates

Occupation

Diagnostic Radiologist

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY  
07 / 25 / 2014

**Transaction ID : C2789767**

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

524.98

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. George W Gallimore JR**

Mailing Address Mid-South Imaging & Therapeutics  
6305 Humphreys Blvd Ste 205

City State Zip Code  
Memphis TN 38120-2379

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Mid South Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.00

Date of Receipt

MM / DD / YYYY  
07 / 11 / 2014

**Transaction ID : C2779138**

Amount of Each Receipt this Period

294.00

Full Name (Last, First, Middle Initial)

**B. Dewey Duane Garner JR**

Mailing Address 2188 Johnson Rd

City State Zip Code  
Germantown TN 38139-3515

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Mid-South Imaging and Therapeutics

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

MM / DD / YYYY  
07 / 11 / 2014

**Transaction ID : C2779162**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Michael John George**

Mailing Address 1620 John St S

City State Zip Code  
Salem OR 97302-5110

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Salem Radiology Consultants

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

MM / DD / YYYY  
07 / 27 / 2014

**Transaction ID : C2790055**

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

794.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. John W Gianini MD**

Mailing Address 56 Foxcroft Run

City

Ormond Beach

State

FL

Zip Code

32174-2475

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiology Associates of Daytona Beach

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

MM / DD / YYYY  
07 / 21 / 2014

**Transaction ID : C2788371**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Thomas R Gleason**

Mailing Address Gleason Diagnostic Imaging PC  
1015 Union St

City

Boone

State

IA

Zip Code

50036-4898

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self

Occupation

Diagnostic Radiologist

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

MM / DD / YYYY  
07 / 31 / 2014

**Transaction ID : C2796524**

Amount of Each Receipt this Period

365.00

Full Name (Last, First, Middle Initial)

**C. Andrew Ryan Gordon MD**

Mailing Address 150 Glenwood Rd

City

Haddonfield

State

NJ

Zip Code

08033-3427

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Southeast Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

MM / DD / YYYY  
07 / 10 / 2014

**Transaction ID : C2779085**

Amount of Each Receipt this Period

120.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1485.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Robert L Gore**

Mailing Address 79 Richmond St

City

Dorchester Center

State

MA

Zip Code

02124-5729

FEC ID number of contributing  
federal political committee.

C

Name of Employer

South Shore Hospital

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

07 / 02 / 2014

**Transaction ID : C2789529**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Robert L Gore**

Mailing Address 79 Richmond St

City

Dorchester Center

State

MA

Zip Code

02124-5729

FEC ID number of contributing  
federal political committee.

C

Name of Employer

South Shore Hospital

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

07 / 03 / 2014

**Transaction ID : C2789545**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Jeffrey Carl Gore**

Mailing Address 2320 Cromwell Cir

City

Davenport

State

IA

Zip Code

52807-2833

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiology Group, P.C.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

07 / 02 / 2014

**Transaction ID : C2771460**

Amount of Each Receipt this Period

600.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

800.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 43 OF 125  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Edward Douglas Green MD**

Mailing Address 106 Windsong Cv

City  
RidgelandState  
MSZip Code  
39157-8736FEC ID number of contributing  
federal political committee.

C

Name of Employer

University of Mississippi Medical Cent

Occupation

Diagnostic Radiologist

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1470.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	1	4

**Transaction ID : C2767589**

Amount of Each Receipt this Period

210.00

Full Name (Last, First, Middle Initial)

**B. Thomas Justin Green JR**

Mailing Address 11014 Hawkshead Ct

City  
WindermereState  
FLZip Code  
34786-5413FEC ID number of contributing  
federal political committee.

C

Name of Employer

Eastern Virginia Medical School

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	1		2	0	1	4

**Transaction ID : C2788372**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**c. Shannon M Gulla MD**

Mailing Address 2043 Glenbuck Cv

City  
GermantownState  
TNZip Code  
38139-3432FEC ID number of contributing  
federal political committee.

C

Name of Employer

Mid South Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	1		2	0	1	4

**Transaction ID : C2779161**

Amount of Each Receipt this Period

294.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

1504.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 44 OF 125

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. David K Haas

Mailing Address 2110 Homeview Ct

City State Zip Code  
 Las Vegas NV 89117

FEC ID number of contributing federal political committee.

C

Name of Employer

SDMI

Occupation

Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 08 2014

Transaction ID : C2774803

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Labib Fouad Haddad

Mailing Address 4 Ramsgate Dr

City State Zip Code  
 Olivette MO 63132-4116

FEC ID number of contributing federal political committee.

C

Name of Employer

West County Radiological Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 03 2014

Transaction ID : C2779107

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

c. Heather Griffith Hahn MD

Mailing Address 136 Bromley Dr

City State Zip Code  
 Wilmington DE 19808-1370

FEC ID number of contributing federal political committee.

C

Name of Employer

Southeast Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 10 2014

Transaction ID : C2779086

Amount of Each Receipt this Period

120.00

SUBTOTAL of Receipts This Page (optional)..... ►

270.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

PAGE 45 OF 125

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Glenn M Hammer**

Mailing Address 2916 Old Orchard Rd NE

City

Cedar Rapids

State

IA

Zip Code

52402-6802

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiology Consultants of Iowa, PLC

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

07 / 10 / 2014

Transaction ID : C2789513

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Gene Han MD**

Mailing Address 24 Briarcliff Rd

City

Tenaflly

State

NJ

Zip Code

07670-2902

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

311.49

Date of Receipt

07 / 10 / 2014

Transaction ID : C2789471

Amount of Each Receipt this Period

23.07

Full Name (Last, First, Middle Initial)

**c. Gene Han MD**

Mailing Address 24 Briarcliff Rd

City

Tenaflly

State

NJ

Zip Code

07670-2902

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

311.49

Date of Receipt

07 / 24 / 2014

Transaction ID : C2798629

Amount of Each Receipt this Period

23.07

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

296.14

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 46 OF 125

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Ben Hugh Harmon

Mailing Address Radia Medical Imaging  
 728 134th St SW Ste 120

City Everett State WA Zip Code 98204-5322

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radia, Inc.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

863.46

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 / 03 / 2014

Transaction ID : C2789503

Amount of Each Receipt this Period

295.38

Full Name (Last, First, Middle Initial)

B. Peter Blaine Hathaway

Mailing Address 4570 Thousand Oaks Dr

City Salt Lake City State UT Zip Code 84124-3975

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Utah Imaging Associates

Occupation

Interventional Radiologist

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 / 26 / 2014

Transaction ID : C2789897

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Robert Alan Hawkins

Mailing Address 7856 Scatchet Head Rd

City Clinton State WA Zip Code 98236

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radia, Inc.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 / 03 / 2014

Transaction ID : C2789504

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)..... ►

845.38

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

PAGE 47 OF 125

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Laura S Hemann**

Mailing Address 6815 Spring Grove Ct NE

City

Cedar Rapids

State

IA

Zip Code

52411-7652

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiology Consultants of Iowa

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	10	/	2014

**Transaction ID : C2789515**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Rayda N Hernandez-Guasch**Mailing Address 89 AVE DE DIEGO STE 105  
PMB 525

City

San Juan

State

PR

Zip Code

00927-6370

FEC ID number of contributing  
federal political committee.

C

Name of Employer

University of Puerto Rico

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	11	/	2014

**Transaction ID : C2778930**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. John Frederick Hiehle JR**

Mailing Address 915 Westdale Avenue

City

Swarthmore

State

PA

Zip Code

19081-2223

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Southeast Radiology, Ltd.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	10	/	2014

**Transaction ID : C2779087**

Amount of Each Receipt this Period

120.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

470.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Michael T Hirleman

Mailing Address 229 Abbotsford Rd

City

Cedar Rapids

State

IA

Zip Code

52403-7003

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiology Consultants of Iowa, PLC

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 10 / 2014

Transaction ID : C2789516

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Lee Eric Hoagland MD

Mailing Address 5922 Cypress Pointe Dr

City

Newburgh

State

IN

Zip Code

47630-9844

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Evansville Radiology, PC

Occupation

Radiologist

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 06 / 2014

Transaction ID : C2771670

Amount of Each Receipt this Period

85.00

Full Name (Last, First, Middle Initial)

C. David W Hoeninger MD

Mailing Address 5903 Winslow Ct

City

Dublin

State

OH

Zip Code

43016-6520

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Columbus Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 23 / 2014

Transaction ID : C2798655

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)..... ►

410.00

TOTAL This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 49 OF 125

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. Betsy A Holland**

Mailing Address 84 Platt Ave

City

Sausalito

State

CA

Zip Code

94965-1896

FEC ID number of contributing  
federal political committee.

C

Name of Employer

California Advanced Imaging

Occupation

Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 21 / 2014

Transaction ID : C2789430

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**B. Michael D Hollett**

Mailing Address 817 Lathrop Dr

City

Stanford

State

CA

Zip Code

94305-1054

FEC ID number of contributing  
federal political committee.

C

Name of Employer

California Advanced Imaging Associates

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 21 / 2014

Transaction ID : C2789431

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**C. Randy Joseph Horras**

Mailing Address 6545 Espalier Cir

City

Memphis

State

TN

Zip Code

38119-6648

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Baptist Mem Hosp-Univ of TN, Mem

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.69

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 11 / 2014

Transaction ID : C2779144

Amount of Each Receipt this Period

291.69

SUBTOTAL of Receipts This Page (optional)..... ►

441.69

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 50 OF 125  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Joshua R Houser MD**

Mailing Address 1882 N Devon Rd

City	State	Zip Code
Columbus	OH	43212-1040

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Columbus RadiologyOccupation  
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	23	/	2014

**Transaction ID : C2798656**

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

**B. Dale A Hume**

Mailing Address 33 Stagecoach Rd

City	State	Zip Code
Chillicothe	OH	45601-9000

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Chillicothe RadiologyOccupation  
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	23	/	2014

**Transaction ID : C2798657**

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

**C. James W Husted**Mailing Address Crozier-Chester Med Ctr  
1 Medical Center Blvd

City	State	Zip Code
Chester	PA	19013-3902

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Southeast Radiology, Ltd.Occupation  
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	10	/	2014

**Transaction ID : C2798088**

Amount of Each Receipt this Period

120.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

420.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Bang Huu Huynh MD**

Mailing Address 1298 Hollywood Pl

City

Grandview

State

OH

Zip Code

43212-3410

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Columbus Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

07 / 23 / 2014

**Transaction ID : C2798658**

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

**B. Elizabeth Ann Ignacio**

Mailing Address 71 Kamaiki Cir

City

Kahului

State

HI

Zip Code

96732-3153

FEC ID number of contributing  
federal political committee.

C

Name of Employer

George Washington Med Center

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

07 / 15 / 2014

**Transaction ID : C2784439**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Cindy Janesky**

Mailing Address Lancaster Radiology Associates  
 PO Box 3555

City

Lancaster

State

PA

Zip Code

17604-3555

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Lancaster Radiology Associates

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

07 / 01 / 2014

**Transaction ID : C2789488**

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

300.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 52 OF 125

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. Amy Kay Janicek MD**

Mailing Address 4800 N Pontatoc Rd

City	State	Zip Code
Tucson	AZ	85718-6107

FEC ID number of contributing federal political committee.

C

Name of Employer

University of AZ

Occupation

Resident

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		08		2014

Transaction ID : C2774802

Amount of Each Receipt this Period

83.50

Full Name (Last, First, Middle Initial)

**B. Paul Russell Jensen**

Mailing Address 4148 North Summer Ridge Rd

City	State	Zip Code
Morgan	UT	84050

FEC ID number of contributing federal political committee.

C

Name of Employer

Utah Imaging Associates, Inc.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		25		2014

Transaction ID : C2789788

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Brian L Johnson**

Mailing Address 850 Chiltern Rd

City	State	Zip Code
Hillsborough	CA	94010-7028

FEC ID number of contributing federal political committee.

C

Name of Employer

California Advanced Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		21		2014

Transaction ID : C2789432

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)..... ►

408.50

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 53 OF 125

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. Peter Anthony S Johnstone**

Mailing Address 8926 Waterside Cir

City

Indianapolis

State

IN

Zip Code

46278-1158

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiation Oncology Division

Occupation

Radiation Oncologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	22	/	2014

Transaction ID : C2788437

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Timothy Royal Jones**

Mailing Address 42 Broadriver Rd

City

Ormond Beach

State

FL

Zip Code

32174-6785

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiology Associates of Daytona Beach

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	21	/	2014

Transaction ID : C2788373

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Peter Jun**

Mailing Address 2091 Cedar Ave

City

Menlo Park

State

CA

Zip Code

94025-5902

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Kaiser Permanente

Occupation

Diagnostic Radiologist

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	03	/	2014

Transaction ID : C2771436

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

1350.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Jay A Kaiser**

Mailing Address CA Advanced Imaging Med Assoc Inc  
1260 S Eliseo Dr

City State Zip Code  
Greenbrae CA 94904-2009

FEC ID number of contributing  
federal political committee.

C

Name of Employer

California Advanced Imaging Medical As

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

MM / DD / YYYY  
07 / 21 / 2014

**Transaction ID : C2789433**

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**B. Alan D Kaye**

Mailing Address 10 Punch Bowl Dr

City State Zip Code  
Westport CT 06880

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Advanced Radiology

Occupation

MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY  
07 / 02 / 2014

**Transaction ID : C2771176**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Russell A Kelley**

Mailing Address PO Box 585

City State Zip Code  
Norwell MA 02061-0585

FEC ID number of contributing  
federal political committee.

C

Name of Employer

South Shore Radiology Associates

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

MM / DD / YYYY  
07 / 02 / 2014

**Transaction ID : C2789530**

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1175.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Russell A Kelley**

Mailing Address PO Box 585

City

Norwell

State

MA

Zip Code

02061-0585

FEC ID number of contributing  
federal political committee.

C

Name of Employer

South Shore Radiology Associates

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 03 / 2014

**Transaction ID : C2789546**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Bart P Keogh**

Mailing Address 232 Belmont Ave E Apt 606

City

Seattle

State

WA

Zip Code

98102-6308

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radia, Inc.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3461.58

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 03 / 2014

**Transaction ID : C2789505**

Amount of Each Receipt this Period

1153.86

Full Name (Last, First, Middle Initial)

**C. William Jay Kim MD**

Mailing Address 405 Golf Course Dr

City

Leonia

State

NJ

Zip Code

07605-1415

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

435.42

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 10 / 2014

**Transaction ID : C2789472**

Amount of Each Receipt this Period

23.07

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1276.93

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 56 OF 125

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. William Jay Kim MD**

Mailing Address 405 Golf Course Dr

City

Leonia

State

NJ

Zip Code

07605-1415

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐  
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

435.42

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y  
 07 / 24 / 2014

Transaction ID : C2798630

Amount of Each Receipt this Period

23.07

Full Name (Last, First, Middle Initial)

**B. Amy Briana Kirby MD**

Mailing Address 14708 Hollyhock Dr

City

Oklahoma City

State

OK

Zip Code

73142-1804

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Eagle Eye Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐  
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

845.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y  
 07 / 02 / 2014

Transaction ID : C2770896

Amount of Each Receipt this Period

85.00

Full Name (Last, First, Middle Initial)

**C. Todd Stuart Klausner**

Mailing Address 4133 Audley Rd

City

New Albany

State

OH

Zip Code

43054-8406

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Emory Univ Hospital

Occupation

Diagnostic Radiologist

Receipt For:

☐  
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y  
 07 / 23 / 2014

Transaction ID : C2798659

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)..... ►

258.07

TOTAL This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Jay M Kleinman**

Mailing Address 2130 Greenbrier Dr

City

Villanova

State

PA

Zip Code

19085-1708

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Southeast Radiology, Ltd.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 10 / 2014

**Transaction ID : C2779089**

Amount of Each Receipt this Period

120.00

Full Name (Last, First, Middle Initial)

**B. Scott David Klioze**

Mailing Address 7 Cypress Hollow Ln

City

Ormond Beach

State

FL

Zip Code

32174-3047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiology Associates of Daytona Beach

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 21 / 2014

**Transaction ID : C2788374**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Ralph Maximilian Koenker**

Mailing Address 14 Meadow Ridge

City

Corte Madera

State

CA

Zip Code

94925

FEC ID number of contributing  
federal political committee.

C

Name of Employer

California Advanced Imaging Medical As

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

765.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 21 / 2014

**Transaction ID : C2789434**

Amount of Each Receipt this Period

255.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1375.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Jeffrey Paul Kramer

Mailing Address 2147 Meadow Ridge Dr

City

Lancaster

State

PA

Zip Code

17601-5762

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Lancaster Radiology Associates

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 01 / 2014

Transaction ID : C2789490

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Carrie L Kresge

Mailing Address 10 Stoney Brook Blvd

City

Newtown Square

State

PA

Zip Code

19073-3953

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Southeast Radiology, Ltd.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 10 / 2014

Transaction ID : C2779090

Amount of Each Receipt this Period

120.00

Full Name (Last, First, Middle Initial)

C. Richard L Kundel

Mailing Address PO Box 10112

City

Cedar Rapids

State

IA

Zip Code

52410-0112

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiology Consultants of Iowa

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 10 / 2014

Transaction ID : C2789518

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

470.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 59 OF 125

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. Ronald Keith Larson**

Mailing Address PO Box 2739

City

Oregon City

State

OR

Zip Code

97045-8520

FEC ID number of contributing  
federal political committee.

C

Name of Employer

North Williamette Radiologists

Occupation

Diagnostic Radiologist

Receipt For: 2014



Primary



General



Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	8		2	0	1	4

Transaction ID : C2790095

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

**B. Paul Albert Leslie**

Mailing Address 260 Eshelman Rd

City

Lancaster

State

PA

Zip Code

17601-5645

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Lancaster Radiology Associates

Occupation

Diagnostic Radiologist

Receipt For:



Primary



General



Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	1	4

Transaction ID : C2789491

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Michael S Levey**

Mailing Address 2533 Bryden Rd

City

Columbus

State

OH

Zip Code

43209-2135

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Columbus Radiology

Occupation

Diagnostic Radiologist

Receipt For:



Primary



General



Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	3		2	0	1	4

Transaction ID : C2798660

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)..... ▶

450.00

TOTAL This Period (last page this line number only)..... ▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. Robert W Levy**

Mailing Address 2141 Villa Way

City

New Smyrna Beach

State

FL

Zip Code

32169-2089

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiology Associates of Daytona Beach

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 21 / 2014

Transaction ID : C2788375

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Errol Lewis**

Mailing Address 6367 S Massey Hill Dr

City

Memphis

State

TN

Zip Code

38120-1407

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Mid-South Imaging &amp; Therapeuti

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 11 / 2014

Transaction ID : C2779147

Amount of Each Receipt this Period

294.00

Full Name (Last, First, Middle Initial)

**C. Arthur Eliot Li**

Mailing Address 4152 Willmar Dr

City

Palo Alto

State

CA

Zip Code

94306-3835

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Johns Hopkins Hosp-Johns Hopkins

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 21 / 2014

Transaction ID : C2789435

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1369.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Gregory Matthew Lim**

Mailing Address 1552 Los Montes Dr

City

Burlingame

State

CA

Zip Code

94010-5964

FEC ID number of contributing  
federal political committee.

C

Name of Employer

California Advanced Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

07 / 21 / 2014

**Transaction ID : C2789436**

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**B. Craig Laurence Lipman**

Mailing Address 10229 Poston Oak Cv

City

Collierville

State

TN

Zip Code

38017-8815

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Mid-South Imag & Therapeutics

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.00

Date of Receipt

07 / 11 / 2014

**Transaction ID : C2779156**

Amount of Each Receipt this Period

294.00

Full Name (Last, First, Middle Initial)

**C. H Esterbrook Longmaid III**

Mailing Address 52 Harwich Rd

City

Chestnut Hill

State

MA

Zip Code

02467-3023

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Deaconess Hospital

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.69

Date of Receipt

07 / 19 / 2014

**Transaction ID : C2788238**

Amount of Each Receipt this Period

41.67

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

410.67

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

## **A. Kay Denise Spong Lozano**

Mailing Address 5991 South High Court

City State Zip Code  
 Centennial CO 80121

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiology Imaging Association

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1463.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 20 / 2014

**Transaction ID : C2788265**

Amount of Each Receipt this Period

209.00

Full Name (Last, First, Middle Initial)

## **B. Jennifer Lyn Lynch**

Mailing Address 154 Forest Ave

City State Zip Code  
 Cohasset MA 02025-1340

FEC ID number of contributing  
federal political committee.

C

Name of Employer

South Shore Radiology Associates

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 02 / 2014

**Transaction ID : C2789531**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

## **C. Jennifer Lyn Lynch**

Mailing Address 154 Forest Ave

City State Zip Code  
 Cohasset MA 02025-1340

FEC ID number of contributing  
federal political committee.

C

Name of Employer

South Shore Radiology Associates

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 03 / 2014

**Transaction ID : C2789547**

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

409.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. James Elliott Machin**

Mailing Address Mid-South Imaging & Therapeutics  
6305 Humphreys Blvd Ste 205

City State Zip Code  
Memphis TN 38120-2379

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Mid-South Imaging & Ther

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

583.31

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 11 / 2014

**Transaction ID : C2779139**

Amount of Each Receipt this Period

583.31

Full Name (Last, First, Middle Initial)

**B. Michael R Macke MD**

Mailing Address 2855 Wildflower Rd

City State Zip Code  
Cedar Rapids IA 52411-4717

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiology Consultants of Iowa, PLC

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 10 / 2014

**Transaction ID : C2789519**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Hubert Lynn Magill**

Mailing Address 2768 Oakleigh Ln

City State Zip Code  
Germantown TN 38138-7316

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Division of Nuclear Medicine

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 11 / 2014

**Transaction ID : C2779149**

Amount of Each Receipt this Period

294.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

977.31

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. John L Mahoney**

Mailing Address South Shore Hospital  
55 Fogg Rd

City State Zip Code  
South Weymouth MA 02190-2432

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
South Shore Hospital

Occupation  
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 02 / 2014

**Transaction ID : C2789532**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. John L Mahoney**

Mailing Address South Shore Hospital  
55 Fogg Rd

City State Zip Code  
South Weymouth MA 02190-2432

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
South Shore Hospital

Occupation  
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 03 / 2014

**Transaction ID : C2789548**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Hiten Maganlal Malde**

Mailing Address 7 Kinkaid Ave

City State Zip Code  
Closter NJ 07624-2908

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hackensack Radiology Group

Occupation  
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.42

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 10 / 2014

**Transaction ID : C2789456**

Amount of Each Receipt this Period

23.07

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

223.07



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Hiten Maganlal Malde**

Mailing Address 7 Kinkaid Ave

City

State

Zip Code

Closter

NJ

07624-2908

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.42

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 24 / 2014

**Transaction ID : C2798631**

Amount of Each Receipt this Period

23.07

Full Name (Last, First, Middle Initial)

**B. David Steven Marcus**

Mailing Address 503 Georgetown Ave

City

State

Zip Code

San Mateo

CA

94402-2253

FEC ID number of contributing  
federal political committee.

C

Name of Employer

California Advanced Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 21 / 2014

**Transaction ID : C2789437**

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**C. David C Marlow**

Mailing Address 7821 115th PI NE

City

State

Zip Code

Kirkland

WA

98033-6710

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radia, Inc.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 03 / 2014

**Transaction ID : C2789506**

Amount of Each Receipt this Period

240.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

338.07

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. Lee A Martin JR**

Mailing Address 819 Honeysuckle Rd

City State Zip Code  
 Gainesville FL 30501-1625

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Self

Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 02 / 2014

Transaction ID : C2771183

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Mark D Mayhle**

Mailing Address 907 14th Ave E

City State Zip Code  
 Seattle WA 98112-3903

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Radia, Inc.

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 03 / 2014

Transaction ID : C2789507

Amount of Each Receipt this Period

600.00

Full Name (Last, First, Middle Initial)

**c. Geraldine B McGinty**

Mailing Address 131 Avenue B Apt 3C

City State Zip Code  
 New York NY 10009-5029

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Montefiore Imaging Center

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 20 / 2014

Transaction ID : C2788266

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

950.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Kathleen Moira McKenna**

Mailing Address 154 Gramercy Dr

City

San Mateo

State

CA

Zip Code

94402-1215

FEC ID number of contributing  
federal political committee.

C

Name of Employer

California Advanced Imaging Medical As

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

07 / 21 / 2014

Transaction ID : C2789438

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**B. Alan J McLeod**

Mailing Address 6377 Blue Heron Cove

City

Memphis

State

TN

Zip Code

38120-3216

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Baptist Memorial Hospital

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.00

Date of Receipt

07 / 11 / 2014

Transaction ID : C2779150

Amount of Each Receipt this Period

294.00

Full Name (Last, First, Middle Initial)

**C. Timothy M Meier MD**

Mailing Address 7377 Linden Ln

City

Dublin

State

OH

Zip Code

43016-7337

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Columbus Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

07 / 23 / 2014

Transaction ID : C2798661

Amount of Each Receipt this Period

150.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

519.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

## **A. Patricia J Mergo**

Mailing Address Mayo Clinic

4500 San Pablo Rd

City

Jacksonville

State

FL

Zip Code

32224-1865

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Univ of Florida Box 100374

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

595.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 06 / 2014

**Transaction ID : C2771665**

Amount of Each Receipt this Period

85.00

Full Name (Last, First, Middle Initial)

## **B. Daniel T Miles**

Mailing Address Radiology Associates

1673 Mason Ave Ste 305

City

Daytona Beach

State

FL

Zip Code

32117-5516

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiology Associates of Daytona Beach

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 21 / 2014

**Transaction ID : C2788376**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

## **C. Steven G Miles**

Mailing Address 33 Forrest View Wy

City

Ormond Beach

State

FL

Zip Code

32174-6759

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiology Associates of Daytona Beach

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 21 / 2014

**Transaction ID : C2788377**

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2085.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Mitchell Alan Miller**

Mailing Address 2 Constitution Court  
#1009

City State Zip Code  
Hoboken NJ 07030-6730

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

658.42

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 10 / 2014

**Transaction ID : C2789462**

Amount of Each Receipt this Period

23.07

Full Name (Last, First, Middle Initial)

**B. Mitchell Alan Miller**

Mailing Address 2 Constitution Court  
#1009

City State Zip Code  
Hoboken NJ 07030-6730

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

658.42

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 24 / 2014

**Transaction ID : C2798633**

Amount of Each Receipt this Period

23.07

Full Name (Last, First, Middle Initial)

**c. Slobodan Miseljic**

Mailing Address 20 Lawrence St

City State Zip Code  
Boston MA 02116-6211

FEC ID number of contributing  
federal political committee.

C

Name of Employer

South Shore Radiology Associates

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 02 / 2014

**Transaction ID : C2798533**

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

146.14

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Slobodan Miseljic**

Mailing Address 20 Lawrence St

City  
Boston

State  
MA

Zip Code  
02116-6211

FEC ID number of contributing  
federal political committee.

C

Name of Employer

South Shore Radiology Associates

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

MM / DD / YYYY  
07 / 03 / 2014

**Transaction ID : C2789549**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Kirk L Moon JR**

Mailing Address 1642 16th Ave

City

San Francisco

State

CA

Zip Code

94122-3527

FEC ID number of contributing  
federal political committee.

C

Name of Employer

California Advanced Imaging Medical As

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

MM / DD / YYYY  
07 / 21 / 2014

**Transaction ID : C2789439**

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**C. Jonathan Asher Morgan**

Mailing Address 25 Roscommon Dr

City

Newtown Square

State

PA

Zip Code

19073-3047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Southeast Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

MM / DD / YYYY  
07 / 10 / 2014

**Transaction ID : C2779091**

Amount of Each Receipt this Period

120.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

295.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Ellen B Morris

Mailing Address 10 Eagle Dr

City State Zip Code  
 Canton MA 02021-1573

FEC ID number of contributing federal political committee.

C

Name of Employer  
 South Shore Hospital

Occupation  
 Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 02 2014

Transaction ID : C2789534

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

B. Ellen B Morris

Mailing Address 10 Eagle Dr

City State Zip Code  
 Canton MA 02021-1573

FEC ID number of contributing federal political committee.

C

Name of Employer  
 South Shore Hospital

Occupation  
 Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 03 2014

Transaction ID : C2789550

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

C. Stephen David Morris

Mailing Address Mid-South Imaging & Therapeutics  
 6305 Humphreys Blvd Ste 205

City State Zip Code  
 Memphis TN 38120-2379

FEC ID number of contributing federal political committee.

C

Name of Employer  
 Mid South Imaging

Occupation  
 Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 11 2014

Transaction ID : C2779157

Amount of Each Receipt this Period

294.00

SUBTOTAL of Receipts This Page (optional)..... ►

444.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. Demetrius Konstantine Morros**

Mailing Address 7418 Ridgcrest Court Rd

City State Zip Code  
Birmingham AL 35242-0525

FEC ID number of contributing federal political committee.

C

Name of Employer  
Birmingham Radiological Group P.C.

Occupation  
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

583.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 05 2014

Transaction ID : C2771623

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

**B. Kurt Andrew Muetterties**

Mailing Address 239 Painter Rd

City State Zip Code  
Media PA 19063-4518

FEC ID number of contributing federal political committee.

C

Name of Employer  
Southeast Radiology Ltd.

Occupation  
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 10 2014

Transaction ID : C2779092

Amount of Each Receipt this Period

120.00

Full Name (Last, First, Middle Initial)

**C. Brian L Murphy**

Mailing Address 81 Mathewson Rd

City State Zip Code  
Barrington RI 02806-4429

FEC ID number of contributing federal political committee.

C

Name of Employer  
RIMI

Occupation  
Diagnostic Radiologist

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 30 2014

Transaction ID : C2795817

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

403.34



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Mohit Madan Naik MD**

Mailing Address 424 W End Ave Apt 18C

City  
New York

State Zip Code  
NY 10024-5785

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

484.56

Date of Receipt

07 / 10 / 2014

Transaction ID : C2789474

Amount of Each Receipt this Period

23.07

Full Name (Last, First, Middle Initial)

**B. Mohit Madan Naik MD**

Mailing Address 424 W End Ave Apt 18C

City  
New York

State Zip Code  
NY 10024-5785

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

484.56

Date of Receipt

07 / 24 / 2014

Transaction ID : C2798634

Amount of Each Receipt this Period

23.07

Full Name (Last, First, Middle Initial)

**C. Khozaim Zein Nakhoda**

Mailing Address 3831 Rotherfield Ln

City  
Chadds Ford

State Zip Code  
PA 19317-8925

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Southeast Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

07 / 10 / 2014

Transaction ID : C2779093

Amount of Each Receipt this Period

120.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

166.14

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

## **A. Timothy Craig Nauert**

Mailing Address Mid-South Imaging & Therapeutics  
6305 Humphreys Blvd Ste 205

City State Zip Code  
Memphis TN 38120-2379

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mid-South Imag & Therapeutics

Occupation  
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 11 / 2014

**Transaction ID : C2779148**

Amount of Each Receipt this Period

294.00

Full Name (Last, First, Middle Initial)

## **B. Adam Werley Nevitt**

Mailing Address 248 Granada Dr

City State Zip Code  
Corte Madera CA 94925-2010

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
California Advanced Imaging

Occupation  
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 21 / 2014

**Transaction ID : C2789440**

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

## **C. Gregory Neal Nicola**

Mailing Address 80 Riverside Blvd Apt 14P

City State Zip Code  
New York NY 10069

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hackensack Radiology Group

Occupation  
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

311.49

Date of Receipt

M M / D D / Y Y Y Y  
07 / 10 / 2014

**Transaction ID : C2789475**

Amount of Each Receipt this Period

23.07

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

392.07

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Gregory Neal Nicola**

Mailing Address 80 Riverside Blvd Apt 14P

City  
New York

State Zip Code  
NY 10069

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

311.49

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 24 / 2014

**Transaction ID : C2798635**

Amount of Each Receipt this Period

23.07

Full Name (Last, First, Middle Initial)

**B. Kevin M O'Brien**

Mailing Address St Johns Macomb Hospital  
11800 E 12 Mile Rd

City  
Warren

State Zip Code  
MI 48093-3494

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Diagnostic Radiology Consultants, PC

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 24 / 2014

**Transaction ID : C2789601**

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

**C. Robert J Optican**

Mailing Address 9270 Gwynn Hollow Cv

City  
Germantown

State Zip Code  
TN 38139-5687

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Mid South Imaging

Occupation

Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 11 / 2014

**Transaction ID : C2779153**

Amount of Each Receipt this Period

294.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

359.07

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

## **A. Dennis S Orwig**

Mailing Address 25 Wolfe Glen Way

City

Kentfield

State

CA

Zip Code

94904-1004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

California Advanced Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 21 / 2014

**Transaction ID : C2789441**

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

## **B. Allen K Oshita**

Mailing Address California Pacific Medical Ctr  
PO Box 7999

City

San Francisco

State

CA

Zip Code

94120-7999

FEC ID number of contributing  
federal political committee.

C

Name of Employer

California Advanced Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 21 / 2014

**Transaction ID : C2789442**

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

## **C. Andrew W Osiason**

Mailing Address 506 Julie Ct

City

Wyckoff

State

NJ

Zip Code

07481-1101

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.42

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 10 / 2014

**Transaction ID : C2789476**

Amount of Each Receipt this Period

23.07

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

173.07

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 77 OF 125  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Andrew W Osiason**

Mailing Address 506 Julie Ct

City	State	Zip Code
Wyckoff	NJ	07481-1101

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.42

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	24	/	2014

**Transaction ID : C2798637**

Amount of Each Receipt this Period

23.07

Full Name (Last, First, Middle Initial)

**B. Virginia S Owen**

Mailing Address 620 Bray Station Rd

City	State	Zip Code
Collierville	TN	38017-3266

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Mid-South Imag &amp; Therapeutics

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	11	/	2014

**Transaction ID : C2779154**

Amount of Each Receipt this Period

294.00

Full Name (Last, First, Middle Initial)

**c. David Panush**

Mailing Address 538 E 84th St Apt 4E

City	State	Zip Code
New York	NY	10028-7357

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.42

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	10	/	2014

**Transaction ID : C2789463**

Amount of Each Receipt this Period

23.07

**SUBTOTAL** of Receipts This Page (optional)..... ►

340.14

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. David Panush**

Mailing Address 538 E 84th St Apt 4E

City

New York

State

NY

Zip Code

10028-7357

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.42

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 24 / 2014

Transaction ID : C2798638

Amount of Each Receipt this Period

23.07

Full Name (Last, First, Middle Initial)

**B. Ranganathan Parthasarathy**

Mailing Address 9725 Legends Dr

City

Germantown

State

TN

Zip Code

38139-6969

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Mid South Imaging

Occupation

Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 11 / 2014

Transaction ID : C2779142

Amount of Each Receipt this Period

294.00

Full Name (Last, First, Middle Initial)

**C. Dhiren Y Patel MD**

Mailing Address 1041 Bluestone Dr

City

Lititz

State

PA

Zip Code

17543-6900

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Lancaster Radiology Associates, Ltd.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 01 / 2014

Transaction ID : C2789492

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

367.07

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

## **A. Divyesh Gaju Patel MD**

Mailing Address 1143 Treadway Rd

City

Munster

State

IN

Zip Code

46321-2856

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiologic Associates of Northwest Ind

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

07 / 20 / 2014

Transaction ID : C2788267

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

## **B. Rita S Patel**

Mailing Address 3 Ware Rd

City

Upper Saddle River

State

NJ

Zip Code

07458-1919

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.42

Date of Receipt

07 / 10 / 2014

Transaction ID : C2789465

Amount of Each Receipt this Period

23.07

Full Name (Last, First, Middle Initial)

## **C. Rita S Patel**

Mailing Address 3 Ware Rd

City

Upper Saddle River

State

NJ

Zip Code

07458-1919

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.42

Date of Receipt

07 / 24 / 2014

Transaction ID : C2798640

Amount of Each Receipt this Period

23.07

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

146.14

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 80 OF 125  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Mark L Pedersen**

Mailing Address 3013 Old Orchard Rd NE

City	State	Zip Code
Cedar Rapids	IA	52402-6801

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	10	/	2014

**Transaction ID : C2789520**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Jean-Pierre Phancao MD**

Mailing Address 3700 California St

City	State	Zip Code
San Francisco	CA	94118-1618

FEC ID number of contributing  
federal political committee.

C

Name of Employer

California Advanced Imaging Medical As

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	21	/	2014

**Transaction ID : C2789443**

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**C. Sean Donovan Pierce**

Mailing Address 509 48th Ave Apt 2A

City	State	Zip Code
Long Island City	NY	11101-5604

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	10	/	2014

**Transaction ID : C2789477**

Amount of Each Receipt this Period

30.00

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

205.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Sean Donovan Pierce**

Mailing Address 509 48th Ave Apt 2A

City

Long Island City

State

NY

Zip Code

11101-5604

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

MM / DD / YYYY  
07 / 24 / 2014

**Transaction ID : C2798641**

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

**B. Curtis T Poor**

Mailing Address 2415 Eagle Cir

City

Bettendorf

State

IA

Zip Code

52722-6202

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiology Group PC SC

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

MM / DD / YYYY  
07 / 04 / 2014

**Transaction ID : C2771589**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**c. Ori Preis MD**

Mailing Address 60 Charlotte Rd

City

Newton

State

MA

Zip Code

02459-1708

FEC ID number of contributing  
federal political committee.

C

Name of Employer

South Shore Hospital

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

MM / DD / YYYY  
07 / 02 / 2014

**Transaction ID : C2789535**

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

380.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 82 OF 125

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. Ori Preis MD**

Mailing Address 60 Charlotte Rd

City

Newton

State

MA

Zip Code

02459-1708

FEC ID number of contributing  
federal political committee.

C

Name of Employer

South Shore Hospital

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	03	/	2014

Transaction ID : C2789551

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Derk D Purcell MD**

Mailing Address 362 Eldridge Ave

City

Mill Valley

State

CA

Zip Code

94941-4556

FEC ID number of contributing  
federal political committee.

C

Name of Employer

University of California San Francisco

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

795.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	10	/	2014

Transaction ID : C2776719

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

**C. Derk D Purcell MD**

Mailing Address 362 Eldridge Ave

City

Mill Valley

State

CA

Zip Code

94941-4556

FEC ID number of contributing  
federal political committee.

C

Name of Employer

University of California San Francisco

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

795.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	25	/	2014

Transaction ID : C2789776

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

365.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 83 OF 125

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Robert S Pyatt JR**

Mailing Address 1391 Hearthside Dr

City

Chambersburg

State

PA

Zip Code

17202-3389

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Chambersburg Imaging Associates

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

765.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	30	/	2014

**Transaction ID : C2797830**

Amount of Each Receipt this Period

265.00

Full Name (Last, First, Middle Initial)

**B. Mohammed Fareed Uddin Quraishi MD**

Mailing Address 534 13th Ave W

City

Kirkland

State

WA

Zip Code

98033-4831

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radia, Inc.

Occupation

Interventional Radiologist

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	11	/	2014

**Transaction ID : C2778931**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Joel I Rakow**

Mailing Address 505 Ivy Lane

City

Wyckoff

State

NJ

Zip Code

07481-1072

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

408.42

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	10	/	2014

**Transaction ID : C2789478**

Amount of Each Receipt this Period

23.07

**SUBTOTAL** of Receipts This Page (optional)..... ►

338.07

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 84 OF 125

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. Joel I Rakow**

Mailing Address 505 Ivy Lane

City

Wyckoff

State

NJ

Zip Code

07481-1072

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.42

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	4		2	0	1	4

Transaction ID : C2798642

Amount of Each Receipt this Period

23.07

Full Name (Last, First, Middle Initial)

**B. Krish Ramprasad**

Mailing Address 116 Harwicke Rd

City

Springfield

State

PA

Zip Code

19064

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Southeast Radiology, Ltd.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	0		2	0	1	4

Transaction ID : C2779094

Amount of Each Receipt this Period

120.00

Full Name (Last, First, Middle Initial)

**C. Vikram A Rao MD**

Mailing Address 14348 Manderleigh Woods Dr

City

Town and Country

State

MO

Zip Code

63017-8056

FEC ID number of contributing  
federal political committee.

C

Name of Employer

West County Radiological Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	3		2	0	1	4

Transaction ID : C2779108

Amount of Each Receipt this Period

42.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

185.07

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 85 OF 125

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. James Vincent Rawson**

Mailing Address Medical College of Georgia  
1120 15th St BA1414

City State Zip Code  
Augusta GA 30912-0006

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Medical College of Georgia

Occupation  
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 06 / 2014

**Transaction ID : C2771666**

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

**B. Venu Vanam Reddy MD**

Mailing Address 5940 Tarrin Ct

City State Zip Code  
Dublin OH 43016-6125

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Columbus Radiology

Occupation  
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 23 / 2014

**Transaction ID : C2798662**

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

**c. James Stirling Rickards MD**

Mailing Address 1266 NW Countryside Ct

City State Zip Code  
McMinnville OR 97128-9528

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
McMinnville Imaging Associates

Occupation  
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 26 / 2014

**Transaction ID : C279886**

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

483.34

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 86 OF 125

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. Craig Allan Roberto MD**

Mailing Address 87 S Riverwalk Dr

City

Palm Coast

State

FL

Zip Code

32137-1318

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiology Associates

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 21 / 2014

Transaction ID : C2788378

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. John M Rogers**

Mailing Address 802 West Gap Creek Road

City

Greer

State

SC

Zip Code

29651-5065

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Greenville Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

294.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 11 / 2014

Transaction ID : C2778932

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

**C. Toni C Roth**

Mailing Address 7849 Stanford Ave

City

Saint Louis

State

MO

Zip Code

63130-3611

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Central Illinois Neurosciences

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 03 / 2014

Transaction ID : C2779109

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

1092.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 87 OF 125

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. Eric Matthew Rubin**

Mailing Address 220 Marcella Ln

City State Zip Code  
 Media PA 19063-2251

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Southeast Radiology, Ltd.

Occupation  
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 / 10 / 2014

Transaction ID : C2779095

Amount of Each Receipt this Period

120.00

Full Name (Last, First, Middle Initial)

**B. Philip J Sabri**

Mailing Address 727 Orchard Ct

City State Zip Code  
 Chambersburg PA 17201-2864

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Chambersburg Imaging Associates

Occupation  
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 / 30 / 2014

Transaction ID : C2797817

Amount of Each Receipt this Period

265.00

Full Name (Last, First, Middle Initial)

**C. Damon C Sacco**

Mailing Address PO Box 895

City State Zip Code  
 Sausalito CA 94966-0895

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
California Advanced Imaging

Occupation  
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 / 21 / 2014

Transaction ID : C2789444

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

460.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 88 OF 125

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Patricia H Saluk

Mailing Address 916 Winding Way

City State Zip Code  
 Media PA 19063-1656

FEC ID number of contributing federal political committee.

C

Name of Employer  
 Southeast Radiology

Occupation  
 Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 10 / 2014

Transaction ID : C2779096

Amount of Each Receipt this Period

120.00

Full Name (Last, First, Middle Initial)

B. Arthur D Sandy

Mailing Address 2136 Peacock Lane

City State Zip Code  
 Birmingham AL 35223-1708

FEC ID number of contributing federal political committee.

C

Name of Employer  
 Advanced Imaging Assoc of AL

Occupation  
 Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 27 / 2014

Transaction ID : C2789920

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Joshua Michael Sapire

Mailing Address 91 Deer Run Rd

City State Zip Code  
 Woodbridge CT 06525-1908

FEC ID number of contributing federal political committee.

C

Name of Employer  
 Advanced Radiology Consultants

Occupation  
 Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 30 / 2014

Transaction ID : C2794785

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

470.00

TOTAL This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 89 OF 125  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Michael Ross Schiering**

Mailing Address Radiology Associates

1673 Mason Ave Ste 305

City

Daytona Beach

State

FL

Zip Code

32117-5516

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiology Associates of Daytona Beach

Occupation

Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 21 / 2014

**Transaction ID : C2788379**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. John Schrumpf**

Mailing Address 61 Chanticleer St

City

Larkspur

State

CA

Zip Code

94939-1515

FEC ID number of contributing  
federal political committee.

C

Name of Employer

California Advanced Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 21 / 2014

**Transaction ID : C2789445**

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**C. Gregory Jay Schwartzman**

Mailing Address 126 Mill Brook Ln

City

Media

State

PA

Zip Code

19063-6319

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Southeast Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 10 / 2014

**Transaction ID : C2779097**

Amount of Each Receipt this Period

120.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1195.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 90 OF 125

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Gary David Schweiger**

Mailing Address Radiology Consultants Of Iowa  
1948 1st Ave NE

City State Zip Code  
Cedar Rapids IA 52402-5377

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Radiology Consultants of Iowa, PLC

Occupation  
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
07 / 10 / 2014

**Transaction ID : C2789522**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Ali R Sepahdari MD**

Mailing Address 11826 Dorothy St Apt 301

City State Zip Code  
Los Angeles CA 90049-5384

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UCLA

Occupation  
Diagnostic Radiologist

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

MM / DD / YYYY  
07 / 28 / 2014

**Transaction ID : C2790094**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Stephen A Sevigny**

Mailing Address 1325 Oak Forest Dr

City State Zip Code  
Ormond Beach FL 32174-4023

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Radiology Associates of Daytona Beach

Occupation  
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY  
07 / 21 / 2014

**Transaction ID : C2788380**

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1200.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 91 OF 125

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Kambiz Kevin Shamlou**

Mailing Address 1507 Oak Forest Dr

City

Ormond Beach

State

FL

Zip Code

32174-3409

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiology Associates

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

07 / 21 / 2014

**Transaction ID : C2788381**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Nancy Marie Sherwin**

Mailing Address The Lankenau Hospital  
100 E Lancaster Ave

City

Wynnewood

State

PA

Zip Code

19096-3483

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiology Associates of the Main Line

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

07 / 18 / 2014

**Transaction ID : C2789709**

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**C. Joel Alan Shockley**

Mailing Address 315 Highgate Ave

City

Worthington

State

OH

Zip Code

43085-3082

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Ohio State Univ Hospital

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

07 / 23 / 2014

**Transaction ID : C2798663**

Amount of Each Receipt this Period

150.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1190.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Leigh S Shuman**

Mailing Address 1182 Oakmont Dr

City

Lancaster

State

PA

Zip Code

17601-5079

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Lancaster Radiology Associates

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 01 / 2014

**Transaction ID : C2789494**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Lonnie D Simmons**

Mailing Address 5222 Brackenwood Ct

City

La Crosse

State

WI

Zip Code

54601

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Gundersen Lutheran Clinic

Occupation

Diagnostic Radiologist

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

583.38

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 20 / 2014

**Transaction ID : C2788256**

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

**c. Roy J Siragusa**

Mailing Address 28 Winding Creek Way

City

Ormond Beach

State

FL

Zip Code

32174-6773

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiology Associates of Daytona Beach

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 21 / 2014

**Transaction ID : C2788382**

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1133.34

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. Stefan M Skalina**

Mailing Address 19 Brookside Rd

City State Zip Code  
 Wallingford PA 19086-6208

FEC ID number of contributing federal political committee.

C

Name of Employer  
 Southeast Radiology

Occupation  
 Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 10 / 2014

Transaction ID : C2779098

Amount of Each Receipt this Period

120.00

Full Name (Last, First, Middle Initial)

**B. Eric David Smith**

Mailing Address 678 6th Ave

City State Zip Code  
 San Francisco CA 94118-3805

FEC ID number of contributing federal political committee.

C

Name of Employer  
 California Advanced Imaging Medical As

Occupation  
 Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 21 / 2014

Transaction ID : C2789446

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**C. Kevin L Smith**

Mailing Address Regional Diagnostic Radiology  
 1990 Connecticut Ave S Ste 100

City State Zip Code  
 Sartell MN 56377-2554

FEC ID number of contributing federal political committee.

C

Name of Employer  
 Regional Diagnostic Radiology

Occupation  
 Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1458.38

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 20 / 2014

Transaction ID : C2788268

Amount of Each Receipt this Period

208.34

SUBTOTAL of Receipts This Page (optional)..... ►

403.34

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Damon Randall Soeiro MD**

Mailing Address 102 S Swarthmore Ave

City State Zip Code  
 Swarthmore PA 19081-1603

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Southeast Radiology

Occupation  
 Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

MM / DD / YYYY  
 07 / 10 / 2014

**Transaction ID : C2779099**

Amount of Each Receipt this Period

120.00

Full Name (Last, First, Middle Initial)

**B. Gail E Starr**

Mailing Address Hackensack Univ Med Ctr  
 20 Prospect Ave Ste 513

City State Zip Code  
 Hackensack NJ 07601-1962

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Hackensack Radiology Group

Occupation  
 Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.73

Date of Receipt

MM / DD / YYYY  
 07 / 10 / 2014

**Transaction ID : C2789457**

Amount of Each Receipt this Period

9.61

Full Name (Last, First, Middle Initial)

**C. Gail E Starr**

Mailing Address Hackensack Univ Med Ctr  
 20 Prospect Ave Ste 513

City State Zip Code  
 Hackensack NJ 07601-1962

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Hackensack Radiology Group

Occupation  
 Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.73

Date of Receipt

MM / DD / YYYY  
 07 / 24 / 2014

**Transaction ID : C2798644**

Amount of Each Receipt this Period

9.61

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

139.22

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Eric J Stein**

Mailing Address Bryn Mawr Hospital  
130 S Bryn Mawr Ave

City State Zip Code  
Bryn Mawr PA 19010-3143

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Radiology Associates of the Main Line

Occupation  
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.04

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 18 / 2014

**Transaction ID : C2789710**

Amount of Each Receipt this Period

108.34

Full Name (Last, First, Middle Initial)

**B. William M Stephenson**

Mailing Address 815 Vista Rd

City State Zip Code  
Hillsborough CA 94010-6965

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
California Advanced Imaging

Occupation  
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 21 / 2014

**Transaction ID : C2789447**

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**c. Susan Kathryn Stevens**

Mailing Address 1040 Bridle Way

City State Zip Code  
Hillsborough CA 94010-7406

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cal Advanced Imaging Med. Assoc.

Occupation  
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 21 / 2014

**Transaction ID : C2789448**

Amount of Each Receipt this Period

75.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

258.34

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. Joseph R Stock**

Mailing Address 115 Plush Mill Road

City

Wallingford

State

PA

Zip Code

19086-6018

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Southeast Radiology, Ltd.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 10 / 2014

Transaction ID : C2779100

Amount of Each Receipt this Period

120.00

Full Name (Last, First, Middle Initial)

**B. Melvin Stone**

Mailing Address 303 Ocean Shore Blvd

City

Ormond Beach

State

FL

Zip Code

32176-5738

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiology Associates of Daytona Beach

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 21 / 2014

Transaction ID : C2788383

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. James Palmer Strain**

Mailing Address 2 Avery St Apt 31A

City

Boston

State

MA

Zip Code

02111-1017

FEC ID number of contributing  
federal political committee.

C

Name of Employer

New England Medical Center

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 02 / 2014

Transaction ID : C2789536

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

1220.00

TOTAL This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. James Palmer Strain**

Mailing Address 2 Avery St Apt 31A

City  
Boston

State  
MA

Zip Code  
02111-1017

FEC ID number of contributing  
federal political committee.

C

Name of Employer

New England Medical Center

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 03 / 2014

**Transaction ID : C2789552**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Niteen N Sukerkar**

Mailing Address 950 Dewberry Ct

City

Chambersburg

State

PA

Zip Code

17201-2870

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Chambersburg Imaging Associates

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 30 / 2014

**Transaction ID : C2797812**

Amount of Each Receipt this Period

265.00

Full Name (Last, First, Middle Initial)

**C. Richard F Sullivan**

Mailing Address 117 Bates Way

City

Hanover

State

MA

Zip Code

02339-1597

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Department of Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 02 / 2014

**Transaction ID : C2789537**

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

465.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Richard F Sullivan**

Mailing Address 117 Bates Way

City

Hanover

State

MA

Zip Code

02339-1597

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Department of Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 03 / 2014

**Transaction ID : C2789553**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Sunitha Sunkavalli**

Mailing Address 943 High Mountain Rd

City

Franklin Lakes

State

NJ

Zip Code

07417-1619

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.73

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 10 / 2014

**Transaction ID : C2789480**

Amount of Each Receipt this Period

9.61

Full Name (Last, First, Middle Initial)

**C. Sunitha Sunkavalli**

Mailing Address 943 High Mountain Rd

City

Franklin Lakes

State

NJ

Zip Code

07417-1619

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.73

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 24 / 2014

**Transaction ID : C2798645**

Amount of Each Receipt this Period

9.61

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

119.22

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 99 OF 125  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. James N Suojanen**Mailing Address South Shore Hospital  
55 Fogg RdCity State Zip Code  
South Weymouth MA 02190-2455FEC ID number of contributing  
federal political committee.

C

Name of Employer  
South Shore Radiology AssociatesOccupation  
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 02 / 2014**Transaction ID : C2789538**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. James N Suojanen**Mailing Address South Shore Hospital  
55 Fogg RdCity State Zip Code  
South Weymouth MA 02190-2455FEC ID number of contributing  
federal political committee.

C

Name of Employer  
South Shore Radiology AssociatesOccupation  
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 03 / 2014**Transaction ID : C2789554**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Paul Russell Tanner**Mailing Address Mid-South Imaging & Therapeutics  
6305 Humphreys Blvd Ste 205City State Zip Code  
Memphis TN 38120-2379FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mid-South Imaging & Therapeutics, P.A.Occupation  
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 11 / 2014**Transaction ID : C2779155**

Amount of Each Receipt this Period

350.00

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

550.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Richard N Taxin**

Mailing Address 5 Hilltop Rd

City

Rose Valley

State

PA

Zip Code

19086-6216

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Southeast Radiology, Ltd.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

760.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 10 / 2014

**Transaction ID : C2779101**

Amount of Each Receipt this Period

120.00

Full Name (Last, First, Middle Initial)

**B. Shawn DeWayne Teague**

Mailing Address 11844 Tarver Ct

City

Fishers

State

IN

Zip Code

46037-8277

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Indiana Univ School of Medicine

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 27 / 2014

**Transaction ID : C2809198**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Kurt E Tech**

Mailing Address 84 Stephens Rd

City

Grosse Pointe Farms

State

MI

Zip Code

48236-3625

FEC ID number of contributing  
federal political committee.

C

Name of Employer

William Beaumont Hospital

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

937.50

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 30 / 2014

**Transaction ID : C2797807**

Amount of Each Receipt this Period

312.50

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

532.50

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. Christopher J Testa MD**

Mailing Address 100 N Park Rd Apt 1369

City

Wyomissing

State

PA

Zip Code

19610-3066

FEC ID number of contributing  
federal political committee.

C

Name of Employer

JM Winston Radiology Associates

Occupation

Diagnostic Radiologist

Receipt For: 2014

☐ Primary  
☐ Other (specify) ▼
☒ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 12 / 2014

Transaction ID : C2779235

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Bruce J Thaler**

Mailing Address 110 S Front St Ste 800

City

Philadelphia

State

PA

Zip Code

19106-3000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Southeast Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 10 / 2014

Transaction ID : C2779102

Amount of Each Receipt this Period

120.00

Full Name (Last, First, Middle Initial)

**C. Lloyd R Thomas JR**Mailing Address Mid-South Imaging & Therapeutics  
6305 Humphreys Blvd Ste 205

City

Memphis

State

TN

Zip Code

38120-2379

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Mid South Imaging

Occupation

Radiologist

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

294.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 11 / 2014

Transaction ID : C2779143

Amount of Each Receipt this Period

294.00

SUBTOTAL of Receipts This Page (optional)..... ►

664.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Jeffrey L Thomasson**

Mailing Address 3 Brookside Ln

City

Saint Louis

State

MO

Zip Code

63124-1814

FEC ID number of contributing  
federal political committee.

C

Name of Employer

West County Radiological Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

07 / 03 / 2014

**Transaction ID : C2779110**

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**B. Francis Joseph Thornton**

Mailing Address 3871 Caribou Rd

City

Verona

State

WI

Zip Code

53593-8664

FEC ID number of contributing  
federal political committee.

C

Name of Employer

UW Health Radiology, Madison WI

Occupation

Diagnostic Radiologist

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

07 / 24 / 2014

**Transaction ID : C2789561**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Eric Frank Tocci MD**

Mailing Address 437 Triton Rd

City

Ormond Beach

State

FL

Zip Code

32176-5459

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiology Associates of Daytona Beach

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

07 / 21 / 2014

**Transaction ID : C2788384**

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1325.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. Allen K Tonkin**

Mailing Address 3415 Chambers Chapel Rd

City

Lakeland

State

TN

Zip Code

38002-9573

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Mid-South Imaging &amp; Therapy PA

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

294.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 11 / 2014

Transaction ID : C2779141

Amount of Each Receipt this Period

294.00

Full Name (Last, First, Middle Initial)

**B. John Christopher Tonkin**

Mailing Address 1937 Southcreek Blvd

City

Port Orange

State

FL

Zip Code

32128-7376

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiology Imaging Associates

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 21 / 2014

Transaction ID : C2788385

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Keith A Tonkin MD**

Mailing Address 1020 Island Dr

City

Memphis

State

TN

Zip Code

38103-8989

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Mid South Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

294.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 11 / 2014

Transaction ID : C2779137

Amount of Each Receipt this Period

294.00

SUBTOTAL of Receipts This Page (optional)..... ►

1588.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Patrick J Toth**

Mailing Address 201 E 80th St Apt 8F

City

New York

State

NY

Zip Code

10021-0515

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.42

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 10 / 2014

**Transaction ID : C2789454**

Amount of Each Receipt this Period

23.07

Full Name (Last, First, Middle Initial)

**B. Patrick J Toth**

Mailing Address 201 E 80th St Apt 8F

City

New York

State

NY

Zip Code

10021-0515

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.42

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 24 / 2014

**Transaction ID : C2798646**

Amount of Each Receipt this Period

23.07

Full Name (Last, First, Middle Initial)

**C. David Barry Turetsky**

Mailing Address 608 John Anderson Dr

City

Ormond Beach

State

FL

Zip Code

32176-4763

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiology Associates of Daytona Beach

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 21 / 2014

**Transaction ID : C2788386**

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1046.14



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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for each category of the  
Detailed Summary Page

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(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. Steven Robert Urbanski**

Mailing Address 67 Marbern Drive

City

Suffield

State

CT

Zip Code

06078-1532

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Jefferson Radiology Group, PC

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

07 / 16 / 2014

**Transaction ID : C2785156**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B. Leonel Vasquez**

Mailing Address 2450 Stonevalley Lane

City

Cumming

State

GA

Zip Code

30041

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Emory Healthcare

Occupation

Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

07 / 06 / 2014

**Transaction ID : C2771669**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Peter R Wahba MD**

Mailing Address 261 Woodhill Ln

City

Media

State

PA

Zip Code

19063-1964

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

07 / 18 / 2014

**Transaction ID : C2789711**

Amount of Each Receipt this Period

40.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

640.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. Jeffrey C Weinreb**

Mailing Address Yale Univ School of Med  
PO Box 208042

City State Zip Code  
New Haven CT 06520-8042

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Yale School of Medicine

Occupation

Radiologist

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 07 / 2014

Transaction ID : C2772464

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Simon Westacott**

Mailing Address 1965 Glendower Dr

City State Zip Code  
Lancaster PA 17601-4945

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Lancaster Radiology Associates

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 01 / 2014

Transaction ID : C2789496

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Patrick Noel Weybright**

Mailing Address 1234 Mastersonville Rd

City State Zip Code  
Manheim PA 17545-9461

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Lancaster Radiology Associates

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 01 / 2014

Transaction ID : C2789497

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

1200.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Richard L Wheat

Mailing Address Sequoia Hospital

170 Alameda De Las Pulgas

City

Redwood City

State

CA

Zip Code

94062-2799

FEC ID number of contributing  
federal political committee.

C

Name of Employer

California Advanced Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	1		2	0	1	4

Transaction ID : C2789450

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

B. C Amy Wilson

Mailing Address 146 W Tulpehocken St

City

Philadelphia

State

PA

Zip Code

19144-2620

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Southeast Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	0		2	0	1	4

Transaction ID : C2779103

Amount of Each Receipt this Period

120.00

Full Name (Last, First, Middle Initial)

C. John S Wilson JR

Mailing Address 15 Arcadia Pl

City

Hillsborough

State

CA

Zip Code

94010-7010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

California Advanced Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	1		2	0	1	4

Transaction ID : C2789451

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

270.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. Randall S Winn**

Mailing Address Reading Hospital & Med Ctr  
PO Box 16052

City	State	Zip Code
Reading	PA	19612-6052

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
West Reading Radiology Assoc

Occupation  
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	05	/	2014

Transaction ID : C2771624

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Dexter H Witte**

Mailing Address 441 Goodwyn St

City	State	Zip Code
Memphis	TN	38111-3311

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mid-South Imag & Therapeutics

Occupation  
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	11	/	2014

Transaction ID : C2779152

Amount of Each Receipt this Period

294.00

Full Name (Last, First, Middle Initial)

**C. Mark D Wittry**

Mailing Address 10525 Concord School Rd

City	State	Zip Code
Saint Louis	MO	63128-1232

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
West County Radiological Group, Inc.

Occupation  
Cardiac Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

583.38

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	08	/	2014

Transaction ID : C2774800

Amount of Each Receipt this Period

83.34

SUBTOTAL of Receipts This Page (optional)..... ►

477.34

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

## **A. Clement Yang MD**

Mailing Address 555 W 59th St Apt 19E

City

New York

State

NY

Zip Code

10019-1241

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

311.49

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 10 / 2014

**Transaction ID : C2789458**

Amount of Each Receipt this Period

23.07

Full Name (Last, First, Middle Initial)

## **B. Clement Yang MD**

Mailing Address 555 W 59th St Apt 19E

City

New York

State

NY

Zip Code

10019-1241

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

311.49

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 24 / 2014

**Transaction ID : C2798648**

Amount of Each Receipt this Period

23.07

Full Name (Last, First, Middle Initial)

## **C. Mark Ming-Yi Yeh**

Mailing Address 330 Cordova St Unit 311

City

Pasadena

State

CA

Zip Code

91101-4604

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Mark M. Yeh, M.D., Inc.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 25 / 2014

**Transaction ID : C2789777**

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

96.14

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. Christopher James Yoo**

Mailing Address 180 Manchester St

City

San Francisco

State

CA

Zip Code

94110-5217

FEC ID number of contributing  
federal political committee.

C

Name of Employer

California Advanced Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 21 / 2014

Transaction ID : C2789452

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**B. Thomas J Yuschok**

Mailing Address 162 Laurelwood Ln

City

Ormond Beach

State

FL

Zip Code

32174-4227

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Radiology Associates of Daytona Beach

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 21 / 2014

Transaction ID : C2788387

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Phillip Thomas Zeni JR**

Mailing Address 9565 Plantation Lake Rd

City

Collierville

State

TN

Zip Code

38017-9370

FEC ID number of contributing  
federal political committee.

C

Name of Employer

U of Arkansas for Medical Sci

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 11 / 2014

Transaction ID : C2779163

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

2075.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. Albert Zilkha**

Mailing Address 1 White Gate Dr

City

Glen Head

State

NY

Zip Code

11545-2745

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Zilkha Radiology

Occupation

Physician

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	0		2	0	1	4

Transaction ID : C2779078

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

500.00

63475.96

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

American College of Radiology Association PAC

**A. Bank of America - Hard**

Transaction ID : D160491

Amount of Each Disbursement this Period

Category/  
Type

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

899.69

Full Name (Last, First, Middle Initial)

Date of Disbursement

### Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Amount of Each Disbursement this Period

State:  District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement	
1	2
3	4
5	6
7	8
9	10
11	12
13	14
15	16
17	18
19	20
21	22
23	24
25	26
27	28
29	30
31	32
33	34
35	36
37	38
39	40
41	42
43	44
45	46
47	48
49	50
51	52
53	54
55	56
57	58
59	60
61	62
63	64
65	66
67	68
69	70
71	72
73	74
75	76
77	78
79	80
81	82
83	84
85	86
87	88
89	90
91	92
93	94
95	96
97	98
99	100

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional).....

899.69

**TOTAL** This Period (last page this line number only).....

899.69



	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

American College of Radiology Association PAC

### A. America's Future Fund PAC

Mailing Address 150 Smokerise Drive

City	State	Zip Code
Wadsworth	OH	44281

Purpose of Disbursement
Contribution to a Leadership PAC

Candidate Name \_\_\_\_\_

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State:  District:

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Transaction ID : D160213

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

## B. BLUEGRASS COMMITTEE

Mailing Address 400 N Capitol St NW #585  
#585

City	State	Zip Code
Washington	DC	20001

Purpose of Disbursement
Contribution to a Leadership PAC

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State:  District:

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Transaction ID : D160214

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. DIANE PAC**

Mailing Address PO Box 1437

City	State	Zip Code
Gallatin	TN	37066

Purpose of Disbursement
Contribution to a Leadership PAC

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

Transaction ID : D160228

Amount of Each Disbursement this Period

5000.00

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

7500.00

<input type="checkbox"/>	21b	<input type="checkbox"/>	22	<input checked="" type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

American College of Radiology Association PAC

### A. Free State PAC

Three digital displays showing the date in MM/DD/YYYY format: 07/31/2014.

Category/  
Type

2000.00

State:  District:

### B. House Majority Trust

Category/  
Type

State:  District:

15000.00

### C. NEW PAC

Category/  
Type

State:  District:

1500.00

18500.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 115 OF 125

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. ORRINPAC**

Mailing Address 175 S. WEST TEMPLE, SUITE 650

City	State	Zip Code
SALT LAKE CITY	UT	84101

Purpose of Disbursement  
Contribution to a Leadership PAC

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		11		2014

**Transaction ID : D159758**

Amount of Each Disbursement this Period

4000.00
---------

Full Name (Last, First, Middle Initial)

**B. Paul DeMarco for Congress**

Mailing Address PO Box 59088

City	State	Zip Code
Birmingham	AL	35259-9088

Purpose of Disbursement  
Contribution to a Federal Campaign

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: AL District: 06

Disbursement For:	2014
	<input type="checkbox"/> Primary
	<input type="checkbox"/> General
	<input checked="" type="checkbox"/> Other (specify) ▼
	Runoff

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		11		2014

**Transaction ID : D159759**

Amount of Each Disbursement this Period

5000.00
---------

Full Name (Last, First, Middle Initial)

**C. Promoting our Republican Team PAC**

Mailing Address 8331 Little Harbor Dr

City	State	Zip Code
Cincinnati	OH	45244-2768

Purpose of Disbursement  
Contribution to a Leadership PAC

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		31		2014

**Transaction ID : D160224**

Amount of Each Disbursement this Period

2500.00
---------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

11500.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 116 OF 125

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. KUSTER FOR CONGRESS, INC.**

Mailing Address P.O. BOX 1498

City	State	Zip Code
Concord	NH	03302

Purpose of Disbursement  
Contribution to a Federal Campaign

Candidate Name

**Rep. Ann McLane Kuster**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NH District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		08		2014

**Transaction ID : D159574**

Amount of Each Disbursement this Period

2000.00
---------

Full Name (Last, First, Middle Initial)

**B. JOHNSON FOR CONGRESS**

Mailing Address P.O. BOX 14496

City	State	Zip Code
POLAND	OH	44514

Purpose of Disbursement  
Contribution to a Federal Campaign

Candidate Name

**Rep. Bill Johnson**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: OH District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		31		2014

**Transaction ID : D160218**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. BLAINE FOR CONGRESS**

Mailing Address PO BOX 1025

City	State	Zip Code
JEFFERSON CITY	MO	65102

Purpose of Disbursement  
Contribution to a Federal Campaign

Candidate Name

**Rep. Blaine Luetkemeyer**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MO District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		30		2014

**Transaction ID : D160194**

Amount of Each Disbursement this Period

2500.00
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**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

5500.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 117 OF 125

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. CATHY MCMORRIS RODGERS FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		31		2014

Mailing Address BOX 137

City	State	Zip Code
SPOKANE	WA	99210

**Transaction ID : D160227**Purpose of Disbursement  
Contribution to a Federal Campaign

Amount of Each Disbursement this Period

Candidate Name

**Rep. Cathy McMorris Rodgers**Category/  
Type

1000.00
---------

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: WA	District: 05		

Full Name (Last, First, Middle Initial)

**B. FRIENDS OF CHERI BUSTOS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		08		2014

Mailing Address P.O. BOX 77

City	State	Zip Code
EAST MOLINE	IL	61244

**Transaction ID : D159578**Purpose of Disbursement  
Contribution to a Federal Campaign

Amount of Each Disbursement this Period

Candidate Name

**Rep. Cheri Bustos**Category/  
Type

2500.00
---------

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: IL	District: 17		

Full Name (Last, First, Middle Initial)

**C. BENISHEK FOR CONGRESS, INC.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		08		2014

Mailing Address PO BOX 108

City	State	Zip Code
GLADSTONE	MI	49837

**Transaction ID : D159577**Purpose of Disbursement  
Contribution to a Federal Campaign

Amount of Each Disbursement this Period

Candidate Name

**Rep. Dan Benishek**Category/  
Type

2000.00
---------

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: MI	District: 01		

**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

5500.00
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	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

American College of Radiology Association PAC

## A. DAVID SCOTT FOR CONGRESS

Rep. David Scott

State: GA District: 13

Category/  
Type

2000.00

## B. SCHAKOWSKY FOR CONGRESS

MM / DD / YYYY

Rep. Jan Schakowsky

State: IL District: 09

Category/  
Type

5000.00

### C. FRIENDS OF JOE PITTS

Rep. Joe Pitts

State: PA District: 16

Category/  
Type

1000.00

8000.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 119 OF 125

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association PAC**

Full Name (Last, First, Middle Initial)

**A. FRIENDS OF MICHELLE**

Mailing Address P.O. BOX 25422

City	State	Zip Code
ALBUQUERQUE	NM	87125

Purpose of Disbursement  
Contribution to a Federal Campaign

Candidate Name

**Rep. Michelle Lujan Grisham**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NM District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		08		2014

**Transaction ID : D159580**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. COFFMAN FOR CONGRESS**

Mailing Address 4950 S YOSEMITE STREET F2 #511

City	State	Zip Code
GREENWOOD VILLAGE	CO	80111

Purpose of Disbursement  
Contribution to a Federal Campaign

Candidate Name

**Rep. Mike Coffman**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: CO District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		08		2014

**Transaction ID : D159575**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. POMPEO FOR CONGRESS INC**

Mailing Address PO BOX 780146

City	State	Zip Code
WICHITA	KS	67212

Purpose of Disbursement  
Contribution to a Federal Campaign

Candidate Name

**Rep. Mike Pompeo**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: KS District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		31		2014

**Transaction ID : D160215**

Amount of Each Disbursement this Period

3500.00
---------

**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

5500.00
---------

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<input type="checkbox"/>	21b	<input type="checkbox"/>	22	<input checked="" type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

American College of Radiology Association PAC

#### A. POMPEO FOR CONGRESS INC

Three digital displays showing the date 07/31/2014 in MM/DD/YYYY format. The first display shows '07' with 'M' labels above the digits. The second display shows '31' with 'D' labels above the digits. The third display shows '2014' with 'Y' labels above each digit. The displays are separated by slashes.

Transaction ID : D160216

Amount of Each Disbursement this Period

2500.00

State: KS District: 04

## B. MIKE THOMPSON FOR CONGRESS

Transaction ID : D160223

Amount of Each Disbursement this Period

2000.00

State: CA District: 05

**C. RYAN FOR CONGRESS, INC.**



Transaction ID : D159579

Amount of Each Disbursement this Period

State: WI District: 01

5500.00

A diagram of a rectangular box with a grid of 10 columns and 4 rows of small squares inside. The top edge of the box is labeled with the number 10.



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 121 OF 125

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

**A. PETE SESSIONS FOR CONGRESS**

Mailing Address PO BOX 823047

City	State	Zip Code
DALLAS	TX	75382

Purpose of Disbursement  
Contribution to a Federal Campaign

Candidate Name

Rep. Pete Sessions

Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: TX District: 32

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		31		2014

Transaction ID : D160222

Amount of Each Disbursement this Period

2500.00
---------

Full Name (Last, First, Middle Initial)

**B. KIND FOR CONGRESS COMMITTEE**

Mailing Address 205 5TH AVENUE SOUTH

City	State	Zip Code
LA CROSSE	WI	54601

Purpose of Disbursement  
Contribution to a Federal Campaign

Candidate Name

Rep. Ron Kind

Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: WI District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		31		2014

Transaction ID : D160220

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. KIND FOR CONGRESS COMMITTEE**

Mailing Address 205 5TH AVENUE SOUTH

City	State	Zip Code
LA CROSSE	WI	54601

Purpose of Disbursement  
Contribution to a Federal Campaign

Candidate Name

Rep. Ron Kind

Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: WI District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		31		2014

Transaction ID : D160226

Amount of Each Disbursement this Period

1000.00
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SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

4500.00
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	21b		22	<b>X</b>	23		24		25		26
	27		28a		28b		28c		29		30b

American College of Radiology Association PAC

### A. TOM REED FOR CONGRESS



Rep. Tom Reed

State: NY District: 23

### B. Strickland for Congress

State: CA District: 25

5000.00

### C. THE EYE OF THE TIGER POLITICAL ACTION COMMITTEE

State:  District:

5000.00

11500.00

83500.00

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 123 OF 125  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>American College of Radiology Association PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00343459	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY	
Full Name of Payee <b>Majority Strategies</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>07 / 28 / 2014</b>	
Mailing Address 135 Professional Drive, Suite 104		Amount 42871.82	
City Ponte Vedra Beach	State FL	Zip Code 32082	Transaction ID : <b>D160089</b>
Purpose of Expenditure Printed advertising for mailing		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY <b>07 / 25 / 2014</b>
Name of Federal Candidate Sen. Pat Roberts		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>KS</u>
Calendar Year-To-Date Per Election for Office Sought		96874.08	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶
Full Name of Payee <b>Majority Strategies</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>07 / 29 / 2014</b>	
Mailing Address 135 Professional Drive, Suite 104		Amount 90937.13	
City Ponte Vedra Beach	State FL	Zip Code 32082	Transaction ID : <b>D160090</b>
Purpose of Expenditure Printed advertising for mailing		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY <b>07 / 25 / 2014</b>
Name of Federal Candidate Sen. Lamar Alexander		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>TN</u>
Calendar Year-To-Date Per Election for Office Sought		133854.80	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures.....▶		133808.95	
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶			
(c) TOTAL Independent Expenditures.....▶			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Richard Taxin MD		[Electronically Filed]	
Signature		Date MM / DD / YYYY <b>08 / 20 / 2014</b>	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 124 OF 125  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

FEC IDENTIFICATION NUMBER ▼

C

C00343459

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on

M M M / D D D / Y Y Y Y Y Y

Full Name of Payee

Mammen Group Inc.

Date of Public Distribution/Dissemination

M M M / D D D / Y Y Y Y Y Y  
07 / 28 / 2014

Mailing Address

1901 L Street, N.W.  
Suite 650

Amount

62000.00

City

Washington

State

DC

Zip Code

20036

Transaction ID : D160085

Date of Disbursement or Obligation

M M M / D D D / Y Y Y Y Y Y  
07 / 28 / 2014

Purpose of Expenditure

Radio Ad

Category/  
Type

Name of Federal Candidate

Bruce Braley

☒ Support  
☐ Oppose

Office Sought:

☐ House

District: \_\_\_\_\_

☐ President☒ Senate

State: IA

Calendar Year-To-Date  
Per Election for Office Sought

104877.96

Disbursement For:  
2014☐ Primary☒ General☐ Other (specify) ▶

Full Name of Payee

Mammen Group Inc.

Date of Public Distribution/Dissemination

M M M / D D D / Y Y Y Y Y Y  
07 / 29 / 2014

Mailing Address

1901 L Street, N.W.  
Suite 650

Amount

42877.96

City

Washington

State

DC

Zip Code

20036

Transaction ID : D160086

Date of Disbursement or Obligation

M M M / D D D / Y Y Y Y Y Y  
07 / 28 / 2014

Purpose of Expenditure

Printed advertising for mailing

Category/  
Type

Name of Federal Candidate

Bruce Braley

☒ Support  
☐ Oppose

Office Sought:

☐ House

District: \_\_\_\_\_

☐ President☒ Senate

State: IA

Calendar Year-To-Date  
Per Election for Office Sought

104877.96

Disbursement For:  
2014☐ Primary☒ General☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶

104877.96

(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶

(c) TOTAL Independent Expenditures..... ▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Richard Taxin MD

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
08 / 20 / 2014

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 125 OF 125  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>American College of Radiology Association PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00343459	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		<div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> <span>MM / DD / YYYY</span> </div> </div>	

Full Name of Payee <b>Majority Strategies</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>07 / 30 / 2014</b>	
Mailing Address 135 Professional Drive, Suite 104		Amount <b>54002.26</b>	
City Ponte Vedra Beach	State FL	Zip Code 32082	Transaction ID : <b>D160152</b>
Purpose of Expenditure Printed advertising for mailing	Category/Type	Date of Disbursement or Obligation MM / DD / YYYY <b>07 / 30 / 2014</b>	
Name of Federal Candidate Sen. Pat Roberts		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>KS</u>
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>Majority Strategies</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>07 / 31 / 2014</b>	
Mailing Address 135 Professional Drive, Suite 104		Amount <b>42917.67</b>	
City Ponte Vedra Beach	State FL	Zip Code 32082	Transaction ID : <b>D160159</b>
Purpose of Expenditure Printed advertising for mailing	Category/Type	Date of Disbursement or Obligation MM / DD / YYYY <b>07 / 31 / 2014</b>	
Name of Federal Candidate Sen. Lamar Alexander		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>TN</u>
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<b>96919.93</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<b>335606.84</b>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Richard Taxin MD

[Electronically Filed]

Signature

Date

 MM / DD / YYYY  
**08 / 20 / 2014**